

SAFE CHAIN SOLUTIONS, LLC

# Drug Supply Chain Security Act Document Doc#00000019214

## (TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: <b>PREZCOBIX TAB 30CT,</b>			Reference Number: <u>01I41045</u> Document Type: <u>Invoice</u> Reference Date: <u>01/13/21</u>											
NDC: 59676-0575-30														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Lot Number</th> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Unique Serial #</th> </tr> <tr> <td>19CG205</td> <td>1</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Lot Number	Quantity	Unique Serial #	19CG205	1									
Lot Number	Quantity	Unique Serial #												
19CG205	1													

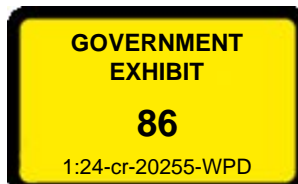
## (TH) Transaction History

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/08/21</b> <b>PO#01211411</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/08/21</b> <b>RC#016362</b>
<b>SOLD TO:</b> Name: <b>HEALTHMAX PHARMACY</b> Address: <b>80-07 JAMAICA AVENUE</b> <b>WOODHAVEN NY 11421</b> Date Purchased & Ref : <b>01/13/21</b> <b>01S37353001</b>	<b>SHIPPED TO:</b> Name: <b>HEALTHMAX PHARMACY</b> Address: <b>80-07 JAMAICA AVENUE</b> <b>WOODHAVEN NY 11421</b> Date Received & Ref : <b>01/13/21</b> <b>01S37353001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

## (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015761**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01132561

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
KD2R	1	
X46V	1	
V59A	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/02/20 PO#01209608

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/08/20 RC#014052

**SOLD TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Purchased &amp; Ref : 09/08/20 01S29942002

**SHIPPED TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Received &amp; Ref : 09/08/20 01S29942002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015761**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01132561

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
WE7K	1	
SE9Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/02/20 PO#01209608

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/08/20 RC#014052

**SOLD TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Purchased &amp; Ref : 09/08/20 01S29942002

**SHIPPED TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Received &amp; Ref : 09/08/20 01S29942002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015761**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I32561

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
PL3D	2	
VW6H	1	
PG9F	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/02/20 PO#01209608	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/08/20 RC#014052
<b>SOLD TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 09/08/20 01S29942002	<b>SHIPPED TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 09/08/20 01S29942002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015761**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01132561

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
KD2R	1	
X46V	1	
V59A	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/02/20 PO#01209608	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/08/20 RC#014052
<b>SOLD TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 09/08/20 01S29942002	<b>SHIPPED TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 09/08/20 01S29942002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015761**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01132561

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
WE7K	1	
SE9Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/02/20 PO#01209608	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/08/20 RC#014052
<b>SOLD TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 09/08/20 01S29942002	<b>SHIPPED TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 09/08/20 01S29942002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

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(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015807**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I32699

Document Type: Invoice

Reference Date: 09/10/20

Lot Number	Quantity	Unique Serial #
20EG062	3	
20GG131	2	
20AG853X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/09/20 PO#01209667	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/09/20 RC#014087
<b>SOLD TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 09/10/20 01S29942004	<b>SHIPPED TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 09/10/20 01S29942004
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

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(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015807**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I32699

Document Type: Invoice

Reference Date: 09/10/20

Lot Number	Quantity	Unique Serial #
19MG726	9	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/09/20 PO#01209667

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/09/20 RC#014087

**SOLD TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Purchased &amp; Ref : 09/10/20 01S29942004

**SHIPPED TO:**

Name: OLYMPIA PLAZA PHARMACY INC

Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036

Date Received &amp; Ref : 09/10/20 01S29942004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015807**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: 01I32699
NDC: 59676-0800-30			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 09/10/20
19MG726	9		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/09/20 PO#01209667	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/09/20 RC#014087
<b>SOLD TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 09/10/20 01S29942004	<b>SHIPPED TO:</b> Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 09/10/20 01S29942004
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

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 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021825**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01145885
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/30/21
MW5J	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020375**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

VENTOLIN INHALER 90 MCG, 90 ug/1, AEROSOL, METERED, 1 INHALER in 1 CARTON (0173-0682-20) &gt; 200 AEROSOL, ME

NDC: S00173-0682-20

Reference Number: 01145885

Document Type: Invoice

Reference Date: 03/30/21

Lot Number	Quantity	Unique Serial #
Y63P	1	

**(TH) Transaction History**

Manufacturer's Name: GLAXO SMITH KLINE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211907	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/11/21 RC#017065
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020568**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

VENTOLIN INHALER 90 MCG, 90 ug/1, AEROSOL, METERED, 1 INHALER in 1 CARTON (0173-0682-20) &gt; 200 AEROSOL, ME

NDC: S00173-0682-20

Reference Number: 01I45885

Document Type: Invoice

Reference Date: 03/30/21

Lot Number	Quantity	Unique Serial #
Y63P	1	

**(TH) Transaction History**

Manufacturer's Name: GLAXO SMITH KLINE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/17/21 PO#01211985	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/17/21 RC#017151
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021830**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01145768

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
JFL6V00A	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/25/21 RC#017833

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/29/21 01S41498001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/29/21 01S41498001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021416**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
ROZEREM-TAB-8MG-30CT,

NDC: 64764-0805-30

Reference Number: 01I45768

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
P27772	1	

**(TH) Transaction History**Manufacturer's Name: TAKEDA PHARMACEUTICALS  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/11/21 PO#01212260

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/11/21 RC#017594

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/29/21 01S41498001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/29/21 01S41498001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021837**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01145768

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
RV5B	1	
XC8B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/26/21 RC#017834
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/29/21 01S41498001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/29/21 01S41498001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45330

Document Type: Invoice

Reference Date: 03/22/21

Lot Number	Quantity	Unique Serial #
20LG390	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/22/21 01S41115001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/22/21 01S41115001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021613**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
VASCEPA 1GM CAP 120CT,

NDC: 52937-0001-20

Lot Number	Quantity	Unique Serial #
8M03950	3	

Reference Number: 01I45330

Document Type: Invoice

Reference Date: 03/22/21

**(TH) Transaction History**Manufacturer's Name: AMARIN PHARMA  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/18/21 PO#01212348	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/18/21 RC#017703
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/22/21 01S41115001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/22/21 01S41115001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020379**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**AMITIZA-CAP-24MCP-60CT,**

NDC: 64764-0240-60

Lot Number	Quantity	Unique Serial #
3263568-61	1	

Reference Number: 01I44270Document Type: InvoiceReference Date: 03/05/21**(TH) Transaction History**Manufacturer's Name: **TAKEDA PHARMACEUTICALS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/11/21</b> <b>PO#01211916</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/12/21</b> <b>RC#017067</b>
<b>SOLD TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Purchased & Ref : <b>03/05/21</b> <b>01S40217001</b>	<b>SHIPPED TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Received & Ref : <b>03/05/21</b> <b>01S40217001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01144270

Document Type: Invoice

Reference Date: 03/05/21

Lot Number	Quantity	Unique Serial #
20KG332	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/05/21 01S40217001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/05/21 01S40217001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021020**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44003

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/01/21 PO#01212108

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/01/21 RC#017381

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/02/21 01S39944001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/02/21 01S39944001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143014

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
BV3V	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/15/21 01S39158001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/15/21 01S39158001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020446**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-637)			Reference Number: <u>01I42989</u>
NDC: 59676-0566-30			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>02/12/21</u>
20LG416	2		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38999002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38999002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: <u>01142989</u>
NDC: 49702-0231-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>02/12/21</u>
BV3W	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38999002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38999002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020450**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142949

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
682H	2	
AP7Y	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 02/12/21 01S38227002

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 02/12/21 01S38227002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I42047

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20GG117	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/21/21 PO#01211610

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/21/21 RC#016624

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 01/28/21 01S38227001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 01/28/21 01S38227001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**COMBIVENT RESPIMAT 20/100M-120PUFF , 20; 100 ug/1; ug/1, SPRAY, METERED, 1 CARTRIDGE in 1 CARTON (0597-0024-**

NDC: 00597-0024-02

Reference Number: 01142047Document Type: InvoiceReference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
905594C	1	

**(TH) Transaction History**Manufacturer's Name: **BOEHRINGER INGELHEIM**

Manufacturer's information:

**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/22/21 PO#01211634****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/25/21 RC#016680****SOLD TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD****MIAMI BEACH FL 33139**Date Purchased & Ref : **01/28/21 01S38227001****SHIPPED TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD****MIAMI BEACH FL 33139**Date Received & Ref : **01/28/21 01S38227001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019084**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**COMBIVENT RESPIMAT 20/100M-120PUFF , 20; 100 ug/1; ug/1, SPRAY, METERED, 1 CARTRIDGE in 1 CARTON (0597-0024-**

NDC: 00597-0024-02

Reference Number: 01142047

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
001230C	1	
001962A	1	

**(TH) Transaction History**

Manufacturer's Name: BOEHRINGER INGELHEIM

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211363	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/07/21 RC#016301
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S38227001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S38227001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019716**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Lot Number	Quantity	Unique Serial #
19CG205	1	

Reference Number: 01I41844Document Type: InvoiceReference Date: 01/26/21**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/25/21</b> <b>PO#01211652</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/25/21</b> <b>RC#016683</b>
<b>SOLD TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Purchased & Ref : <b>01/26/21</b> <b>01S38070001</b>	<b>SHIPPED TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Received & Ref : <b>01/26/21</b> <b>01S38070001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41844

Document Type: Invoice

Reference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
20JG278	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/21/21 PO#01211610

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/21/21 RC#016618

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 01/26/21 01S38070001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 01/26/21 01S38070001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42036

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S37896002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S37896002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020679**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01143554
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/23/21
A65T	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/23/21 01S37411006	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/23/21 01S37411006
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020651**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01143462

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
8L4J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/22/21 01S37411005	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/22/21 01S37411005
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142084

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
2Y6Y	1	
RA5C	1	
XB9B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S37411003	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S37411003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019623**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01141599

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
7N9K	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37411002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37411002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41109

Document Type: Invoice

Reference Date: 01/14/21

Lot Number	Quantity	Unique Serial #
20JG269	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/14/21 01S37411001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/14/21 01S37411001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020651**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01143460

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
TP5Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/22/21 01S37230001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/22/21 01S37230001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019607**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I41628

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
682H	1	
Y22X	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016622
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37137003	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37137003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: <u>01I43925</u>
NDC: 59676-0800-30			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>03/01/21</u>
20HG204	1		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE ROAD #150 NOVI MI 48377 Date Purchased & Ref : 03/01/21 01S39916001	<b>SHIPPED TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE RD #150 NOVI MI 48377 Date Received & Ref : 03/01/21 01S39916001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement:** This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013742**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01130794

Document Type: Invoice

Reference Date: 08/11/20

Lot Number	Quantity	Unique Serial #
19NG777	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/15/20 PO#01208419	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/29/20 RC#012729
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 08/11/20 01S28778001	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 08/11/20 01S28778001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013742**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01130794

Document Type: Invoice

Reference Date: 08/11/20

Lot Number	Quantity	Unique Serial #
19NG777	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/15/20 PO#01208419	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/29/20 RC#012729
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 08/11/20 01S28778001	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 08/11/20 01S28778001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013742**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01130794

Document Type: Invoice

Reference Date: 08/11/20

Lot Number	Quantity	Unique Serial #
19NG777	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/15/20 PO#01208419	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/29/20 RC#012729
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 08/11/20 01S28778001	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 08/11/20 01S28778001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018002**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-637)			Reference Number: 01I39141
NDC: 59676-0566-30			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/10/20
20JG278	2		
20HG207	1		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015588
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 12/10/20 01S35715001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 12/10/20 01S35715001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139141

Document Type: Invoice

Reference Date: 12/10/20

Lot Number	Quantity	Unique Serial #
7N9J	1	
V79D	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015740
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 12/10/20 01S35715001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 12/10/20 01S35715001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018791**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140475

Document Type: Invoice

Reference Date: 01/05/21

Lot Number	Quantity	Unique Serial #
7N9J	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 01/05/21 01S36524001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 01/05/21 01S36524001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019623**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01141643

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
2T4G	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 01/21/21 01S37593001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 01/21/21 01S37593001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142129

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
7N9J	5	
BV3W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 01/29/21 01S38267001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 01/29/21 01S38267001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143444

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
7L4D	1	
EK5N	1	
VW6H	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 02/22/21 01S39186001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 02/22/21 01S39186001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143444

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
WE7K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 02/22/21 01S39186001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 02/22/21 01S39186001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021011**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I44033

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
JGL8A01	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 03/02/21 01S39967001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 03/02/21 01S39967001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021026**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I44033

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
20EG106	1	
20GG117	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/01/21 PO#01212108

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/01/21 RC#017385

**SOLD TO:**

Name: KJRX

Address: 1912 LIBERTY ROAD #21

SYKESVILLE MD 21784

Date Purchased &amp; Ref : 03/02/21 01S39967001

**SHIPPED TO:**

Name: KJRX

Address: 1912 LIBERTY ROAD #21

SYKESVILLE MD 21784

Date Received &amp; Ref : 03/02/21 01S39967001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021020**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44033

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
20LG416	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 03/02/21 01S39967001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 03/02/21 01S39967001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021029**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44033

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
19MG726	1	
20EG062	2	
20GG131	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/02/21 RC#017387
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 03/02/21 01S39967001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 03/02/21 01S39967001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I44033

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
JP7D	1	
W24V	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/02/21 RC#017389
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 03/02/21 01S39967001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 03/02/21 01S39967001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018002**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I39141

Document Type: Invoice

Reference Date: 12/10/20

Lot Number	Quantity	Unique Serial #
20JG278	2	
20HG207	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015588
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 12/10/20 01S35715001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 12/10/20 01S35715001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01139141
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/10/20
7N9J	1		
V79D	5		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015740
<b>SOLD TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Purchased & Ref : 12/10/20 01S35715001	<b>SHIPPED TO:</b> Name: KJRX Address: 1912 LIBERTY ROAD #21 SYKESVILLE MD 21784 Date Received & Ref : 12/10/20 01S35715001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44538

Document Type: Invoice

Reference Date: 03/09/21

Lot Number	Quantity	Unique Serial #
19MG726	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/09/21 01S40445001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/09/21 01S40445001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021301**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44450

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
20MG452	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/08/21 01S40371001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/08/21 01S40371001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: <u>01I44450</u>
NDC: 59676-0800-30			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>03/08/21</u>
20KG322	2		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/08/21 01S40371001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/08/21 01S40371001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144450

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
7J4V	1	
CN8D	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/08/21 01S40371001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/08/21 01S40371001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021305**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01144450
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/08/21
7N9K	3		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/08/21 01S40371001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/08/21 01S40371001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021301**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44415

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
20JG277	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017537

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 03/08/21 01S40133002

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 03/08/21 01S40133002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144193

Document Type: Invoice

Reference Date: 03/04/21

Lot Number	Quantity	Unique Serial #
2Y6Y	1	
8N2Y	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/02/21 RC#017389
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/04/21 01S40133001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/04/21 01S40133001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144034

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
U35F	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/02/21 RC#017389
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/02/21 01S39930002	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/02/21 01S39930002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019703**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
REXULTI-TAB-.5MG-30CT,

NDC: 59148-0036-13

Reference Number: 01I43970

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
BKS03620A	1	

**(TH) Transaction History**

Manufacturer's Name: OTSUKA AMERICA

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/22/21 PO#01211635

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/25/21 RC#016681

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 03/01/21 01S39930001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 03/01/21 01S39930001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43970

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20HG204	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 03/01/21 01S39930001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 03/01/21 01S39930001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021305**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01144686

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
BV3V	1	
BV3W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/11/21 01S40592001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/11/21 01S40592001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44686

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
19MG726	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 03/11/21 01S40592001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 03/11/21 01S40592001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42130

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20KG322	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016747

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 01/29/21 01S38268001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 01/29/21 01S38268001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142130

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
BV3W	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 01/29/21 01S38268001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 01/29/21 01S38268001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020018**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I42332Document Type: InvoiceReference Date: 02/03/21

Lot Number	Quantity	Unique Serial #
19CG210	3	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **02/02/21 PO#01211788****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **02/02/21 RC#016869****SOLD TO:**Name: **MAIN STREET PHARMACY**Address: **667 MAIN STREET****LAUREL MD 20707**Date Purchased & Ref : **02/03/21 01S38533001****SHIPPED TO:**Name: **MAIN STREET PHARMACY**Address: **667 MAIN STREET****LAUREL MD 20707**Date Received & Ref : **02/03/21 01S38533001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018789**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I40335

Document Type: Invoice

Reference Date: 01/04/21

Lot Number	Quantity	Unique Serial #
20KG322	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/23/20 PO#01211221

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/28/20 RC#016109

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 01/04/21 01S36595001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 01/04/21 01S36595001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019049**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: 01I41662
NDC: 59676-0800-30			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 01/22/21
20KG322	1		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 01/22/21 01S36821001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 01/22/21 01S36821001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019603**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I41663

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
20HG204	1	
20EG062	1	
20GG131	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/21/21 PO#01211610

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/21/21 RC#016618

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 01/22/21 01S36821002

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 01/22/21 01S36821002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019603**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I41663

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
20AG853X	1	
20GG129	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 01/22/21 01S36821002	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 01/22/21 01S36821002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019867**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I42035

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
BJ7T	1	
FL5F	1	
CJ4U	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 01/28/21 01S36821003	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 01/28/21 01S36821003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018791**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140115

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
526T	1	
EK5N	1	
N78R	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 12/28/20 01S36471001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 12/28/20 01S36471001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018791**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01140115
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/28/20
YK3E	1		
YR8X	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 12/28/20 01S36471001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 12/28/20 01S36471001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143550

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
7N9K	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/23/21 01S39591001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/23/21 01S39591001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43642

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
19MG727X	1	
20AG853X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET  
LAUREL MD 20707

Date Purchased &amp; Ref : 02/24/21 01S39617002

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET  
LAUREL MD 20707

Date Received &amp; Ref : 02/24/21 01S39617002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43620

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
20DG048	1	
20EG106	2	
20GG117	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017224

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 02/23/21 01S39630001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 02/23/21 01S39630001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;</b>			Reference Number: <u>01I43620</u>
NDC: 59676-0575-30			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>02/23/21</u>
20HG193	5		
20HG205	1		

**(TH) Transaction History**

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/22/21</b> <b>PO#01212034</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/22/21</b> <b>RC#017224</b>
<b>SOLD TO:</b> Name: <b>MAIN STREET PHARMACY</b> Address: <b>667 MAIN STREET</b> <b>LAUREL MD 20707</b> Date Purchased & Ref : <b>02/23/21</b> <b>01S39630001</b>	<b>SHIPPED TO:</b> Name: <b>MAIN STREET PHARMACY</b> Address: <b>667 MAIN STREET</b> <b>LAUREL MD 20707</b> Date Received & Ref : <b>02/23/21</b> <b>01S39630001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020444**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43620

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
20JG269	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 02/23/21 01S39630001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 02/23/21 01S39630001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143670

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
7N9J	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/24/21 01S39673001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/24/21 01S39673001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020660**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I43863

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017222

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 02/26/21 01S39856001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 02/26/21 01S39856001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020449**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43038

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
20KG332	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/15/21 01S39165001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/15/21 01S39165001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143009
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/15/21
GS5E	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/15/21 01S39168001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/15/21 01S39168001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143102
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/16/21
2T4G	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/16/21 01S39168002	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/16/21 01S39168002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143335
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/19/21
BV3V	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/19/21 01S39168003	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/19/21 01S39168003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: <u>01143473</u>
NDC: 49702-0231-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>02/22/21</u>
WE7K	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/22/21 01S39168004	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/22/21 01S39168004
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020458**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143069

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
T012616	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/15/21 RC#017082
<b>SOLD TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Purchased & Ref : 02/15/21 01S39182001	<b>SHIPPED TO:</b> Name: MAIN STREET PHARMACY Address: 667 MAIN STREET LAUREL MD 20707 Date Received & Ref : 02/15/21 01S39182001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020438**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01143069

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
JIL3G00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 02/15/21 01S39182001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 02/15/21 01S39182001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020534**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I43158Document Type: InvoiceReference Date: 02/17/21

Lot Number	Quantity	Unique Serial #
19CG208	5	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **02/16/21 PO#01211958****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **02/16/21 RC#017129****SOLD TO:**Name: **MAIN STREET PHARMACY**Address: **667 MAIN STREET****LAUREL MD 20707**Date Purchased & Ref : **02/17/21 01S39236001****SHIPPED TO:**Name: **MAIN STREET PHARMACY**Address: **667 MAIN STREET****LAUREL MD 20707**Date Received & Ref : **02/17/21 01S39236001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020536**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
TIVICAY-TAB-50MG-30CT,

NDC: 49702-0228-13

Reference Number: 01I43158

Document Type: Invoice

Reference Date: 02/17/21

Lot Number	Quantity	Unique Serial #
8ZP8166	1	

**(TH) Transaction History**Manufacturer's Name: VIIV HEALTHCARE  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/16/21 PO#01211958

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/16/21 RC#017129

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Purchased &amp; Ref : 02/17/21 01S39236001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET

LAUREL MD 20707

Date Received &amp; Ref : 02/17/21 01S39236001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020537**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
TRIUMEQ-TAB-600MG/50MG/300MG-30CT,

NDC: 49702-0231-13

Reference Number: 01I43158

Document Type: Invoice

Reference Date: 02/17/21

Lot Number	Quantity	Unique Serial #
3K4E	1	

**(TH) Transaction History**Manufacturer's Name: VIIV HEALTHCARE  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/16/21 PO#01211958

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/16/21 RC#017129

**SOLD TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET  
LAUREL MD 20707

Date Purchased &amp; Ref : 02/17/21 01S39236001

**SHIPPED TO:**

Name: MAIN STREET PHARMACY

Address: 667 MAIN STREET  
LAUREL MD 20707

Date Received &amp; Ref : 02/17/21 01S39236001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014284**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)			Reference Number: 01I29510
NDC: 00006-0227-61			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 07/23/20
S006926	1		

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP & DOHME  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 07/16/20 PO#01208861	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/17/20 RC#013089
<b>SOLD TO:</b> Name: BAY PHARMACY 19 INC Address: 7606 AUSTIN STREET FOREST HILLS NY 11375 Date Purchased & Ref : 07/23/20 01S27639002	<b>SHIPPED TO:</b> Name: BAY PHARMACY 19 INC Address: 7606 AUSTIN STREET FOREST HILLS NY 11375 Date Received & Ref : 07/23/20 01S27639002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I29510

Document Type: Invoice

Reference Date: 07/23/20

Lot Number	Quantity	Unique Serial #
19HG416	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/16/20 PO#01208861

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/17/20 RC#013084

**SOLD TO:**

Name: BAY PHARMACY 19 INC

Address: 7606 AUSTIN STREET

FOREST HILLS NY 11375

Date Purchased &amp; Ref : 07/23/20 01S27639002

**SHIPPED TO:**

Name: BAY PHARMACY 19 INC

Address: 7606 AUSTIN STREET

FOREST HILLS NY 11375

Date Received &amp; Ref : 07/23/20 01S27639002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)			Reference Number: 01143961
NDC: 00006-0227-61			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/01/21
T032792	1		
T032793	1		
T032933	2		

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP & DOHME  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/01/21 01S39904001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/01/21 01S39904001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143961

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
T040169	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/01/21 01S39904001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/01/21 01S39904001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019872**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143961

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
T032793	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016747

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/01/21 01S39904001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/01/21 01S39904001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020458**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143961

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
T032793	6	
T032933	6	
T040169	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/15/21 RC#017082
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/01/21 01S39904001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/01/21 01S39904001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143965

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
FU5E	22	
GH3U	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/01/21 01S39896001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/01/21 01S39896001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143965
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/01/21
GS5E	15		
RN2K	3		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/01/21 01S39896001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/01/21 01S39896001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021013**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01144212

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 03/04/21

Lot Number	Quantity	Unique Serial #
KGL0001	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/04/21 01S40167001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/04/21 01S40167001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: 01144383
NDC: 59676-0800-30			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/08/21
20KG322	6		
20KG332	12		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/08/21 01S40305001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/08/21 01S40305001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021299**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01144444

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
20HG193	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/08/21 01S40357002	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/08/21 01S40357002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020444**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I44444

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
20KG334	4	
20KG337	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/08/21 01S40357002	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/08/21 01S40357002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;</b>			Reference Number: <u>01144444</u>
NDC: 59676-0575-30			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>03/08/21</u>
20KG337	3		
20MG466	1		

**(TH) Transaction History**

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/22/21</b> <b>PO#01212034</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/22/21</b> <b>RC#017224</b>
<b>SOLD TO:</b> Name: <b>TOTAL REMEDY &amp; PRESCRIPTION CENTER</b> Address: <b>1234 WILSHIRE BLVD #106</b> <b>LOS ANGELES CA 90017</b> Date Purchased & Ref : <b>03/08/21</b> <b>01S40357002</b>	<b>SHIPPED TO:</b> Name: <b>TOTAL REMEDY &amp; PRESCRIPTION CENTER</b> Address: <b>1234 WILSHIRE BLVD #106</b> <b>LOS ANGELES CA 90017</b> Date Received & Ref : <b>03/08/21</b> <b>01S40357002</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021334**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01144503

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 03/09/21

Lot Number	Quantity	Unique Serial #
KBL0000	1	
KGL0001	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017553
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/09/21 01S40167003	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/09/21 01S40167003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021296**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01144508
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/09/21
MW5J	3		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017536
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/09/21 01S40167002	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/09/21 01S40167002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021300**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01144508

Document Type: Invoice

Reference Date: 03/09/21

Lot Number	Quantity	Unique Serial #
20DG002X	1	
20LG401	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/09/21 01S40167002	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/09/21 01S40167002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021305**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01144762

Document Type: Invoice

Reference Date: 03/12/21

Lot Number	Quantity	Unique Serial #
BV3V	13	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01144762
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/12/21
BV3V	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01144762
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/12/21
RN2K	6		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44762

Document Type: Invoice

Reference Date: 03/12/21

Lot Number	Quantity	Unique Serial #
20GG129	1	
20HG203	2	
20HG204	7	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44762

Document Type: Invoice

Reference Date: 03/12/21

Lot Number	Quantity	Unique Serial #
20KG332	5	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE			Reference Number: <u>01I44762</u>
NDC: 59676-0800-30			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>03/12/21</u>
20KG322	2		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/12/21 01S40618001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/12/21 01S40618001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01145239
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/19/21
MW5J	4		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/19/21 PO#01212358	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/19/21 RC#017730
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/19/21 01S41004001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/19/21 01S41004001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021822**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01145611

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
KGL0002	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/26/21 01S40167004	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/26/21 01S40167004
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021829**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I45611

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
20BG904	1	
20EG087	2	
20MG465	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/25/21 RC#017833

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S40167004

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S40167004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021819**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I45614

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
BJ7T	1	
BJ7Y	1	
KE3G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/25/21 RC#017833

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41391001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41391001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021821**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01145615

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
JGL2C00	1	
KBL2K00A	1	
KFL6Y00A	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/26/21 01S41393001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/26/21 01S41393001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021821**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I45615

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
KFL7500	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/26/21 01S41393001	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/26/21 01S41393001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021825**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)

NDC: 49702-0242-13

Reference Number: 01I45682

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
BV4B	2	
MW5J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Purchased & Ref : 03/26/21 01S41004002	<b>SHIPPED TO:</b> Name: TOTAL REMEDY & PRESCRIPTION CENTER Address: 1234 WILSHIRE BLVD #106 LOS ANGELES CA 90017 Date Received & Ref : 03/26/21 01S41004002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
2Y7S	1	
682E	4	
7J4V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
8L3M	3	
9R2Y	2	
E76Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
FU5E	5	
GH3U	1	
HN9W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
LK9U	1	
PN5E	3	
RJ8T	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
RT6F	1	
RW9Y	1	
SY7D	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
SY7L	1	
T96C	1	
VT3C	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

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Date Purchased &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
WP4P	1	
Y22W	2	
SH7B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
GB2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145710

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
LD3H	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017537

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/26/21 01S41410001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/26/21 01S41410001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016822**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I35455

Document Type: Invoice

Reference Date: 10/19/20

Lot Number	Quantity	Unique Serial #
19MG726	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/16/20 PO#01210201	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/19/20 RC#014755
<b>SOLD TO:</b> Name: ELITE PHARMACY Address: 3201 S MALCOM X BLVD DALLAS TX 75215 Date Purchased & Ref : 10/19/20 01S32511001	<b>SHIPPED TO:</b> Name: ELITE PHARMACY Address: 3201 S MALCOM X BLVD DALLAS TX 75215 Date Received & Ref : 10/19/20 01S32511001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019716**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41835Document Type: InvoiceReference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
19CG205	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/25/21</b> <b>PO#01211652</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/25/21</b> <b>RC#016683</b>
<b>SOLD TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Purchased & Ref : <b>01/26/21</b> <b>01S38071001</b>	<b>SHIPPED TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Received & Ref : <b>01/26/21</b> <b>01S38071001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019871**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01141993

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
KAL2D03	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 01/28/21 01S38218001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 01/28/21 01S38218001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019041**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41997Document Type: InvoiceReference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
19CG202	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **01/05/21 PO#01211329****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **01/05/21 RC#016276****SOLD TO:**Name: **PHARMAQUICK LLC**Address: **753 ARTHUR GODFREY RD  
MIAMI BEACH FL 33140**Date Purchased & Ref : **01/28/21 01S38071002****SHIPPED TO:**Name: **PHARMAQUICK LLC**Address: **753 ARTHUR GODFREY RD  
MIAMI BEACH FL 33140**Date Received & Ref : **01/28/21 01S38071002****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142070

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
885M	2	
GB2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: PHARMAQUICK LLC

Address: 753 ARTHUR GODFREY RD

MIAMI BEACH FL 33140

Date Purchased &amp; Ref : 01/28/21 01S37641002

**SHIPPED TO:**

Name: PHARMAQUICK LLC

Address: 753 ARTHUR GODFREY RD

MIAMI BEACH FL 33140

Date Received &amp; Ref : 01/28/21 01S37641002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020193**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I42773Document Type: InvoiceReference Date: 02/10/21

Lot Number	Quantity	Unique Serial #
19CG210	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/08/21</b> <b>PO#01211866</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/08/21</b> <b>RC#016992</b>
<b>SOLD TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Purchased & Ref : <b>02/10/21</b> <b>01S38992001</b>	<b>SHIPPED TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Received & Ref : <b>02/10/21</b> <b>01S38992001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020449**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01142965

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 02/12/21 01S38569002	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 02/12/21 01S38569002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020446**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01142971

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 02/12/21 01S38992002	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 02/12/21 01S38992002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020508**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I43107Document Type: InvoiceReference Date: 02/16/21

Lot Number	Quantity	Unique Serial #
19CG208	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/15/21</b> <b>PO#01211945</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/15/21</b> <b>RC#017115</b>
<b>SOLD TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Purchased & Ref : <b>02/16/21</b> <b>01S39224001</b>	<b>SHIPPED TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Received & Ref : <b>02/16/21</b> <b>01S39224001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020620**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I43361

Document Type: Invoice

Reference Date: 02/19/21

Lot Number	Quantity	Unique Serial #
682H	3	
AP7Y	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/19/21 PO#01212031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/19/21 RC#017202
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 02/19/21 01S38992003	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 02/19/21 01S38992003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020438**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01143931

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
KGL0001	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/01/21 01S39901001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/01/21 01S39901001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43931

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/01/21 01S39901001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/01/21 01S39901001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021312**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I44460Document Type: InvoiceReference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
19CG210	2	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>03/08/21</b> <b>PO#01212218</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>03/08/21</b> <b>RC#017540</b>
<b>SOLD TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Purchased & Ref : <b>03/08/21</b> <b>01S40300002</b>	<b>SHIPPED TO:</b> Name: <b>PHARMAQUICK LLC</b> Address: <b>753 ARTHUR GODFREY RD</b> <b>MIAMI BEACH FL 33140</b> Date Received & Ref : <b>03/08/21</b> <b>01S40300002</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021294**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144672

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
T032792	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017536
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/11/21 01S40573001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/11/21 01S40573001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021301**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44672

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/11/21 01S40573001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/11/21 01S40573001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144782

Document Type: Invoice

Reference Date: 03/12/21

Lot Number	Quantity	Unique Serial #
682E	1	
682H	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/12/21 01S40655002	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/12/21 01S40655002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019051**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
TIVICAY-TAB-10MG-30CT,

NDC: 49702-0226-13

Reference Number: 01I44948

Document Type: Invoice

Reference Date: 03/16/21

Lot Number	Quantity	Unique Serial #
UH7X	1	

**(TH) Transaction History**Manufacturer's Name: VIIV HEALTHCARE  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/16/21 01S40804001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/16/21 01S40804001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020651**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I45123

Document Type: Invoice

Reference Date: 03/17/21

Lot Number	Quantity	Unique Serial #
8L4J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/18/21 01S40988001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/18/21 01S40988001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45328

Document Type: Invoice

Reference Date: 03/22/21

Lot Number	Quantity	Unique Serial #
20LG390	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/22/21 01S41121001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/22/21 01S41121001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021613**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
VASCEPA 1GM CAP 120CT,

NDC: 52937-0001-20

Lot Number	Quantity	Unique Serial #
8M03950	1	

Reference Number: 01I45328

Document Type: Invoice

Reference Date: 03/22/21

**(TH) Transaction History**Manufacturer's Name: AMARIN PHARMA  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/18/21 PO#01212348

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/18/21 RC#017703

**SOLD TO:**

Name: PHARMAQUICK LLC

Address: 753 ARTHUR GODFREY RD

MIAMI BEACH FL 33140

Date Purchased &amp; Ref : 03/22/21 01S41121001

**SHIPPED TO:**

Name: PHARMAQUICK LLC

Address: 753 ARTHUR GODFREY RD

MIAMI BEACH FL 33140

Date Received &amp; Ref : 03/22/21 01S41121001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021832**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I45777

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/29/21 01S41502001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/29/21 01S41502001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021823**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)

NDC: 00006-3080-01

Reference Number: 01145777

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
T039120	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Purchased & Ref : 03/29/21 01S41502001	<b>SHIPPED TO:</b> Name: PHARMAQUICK LLC Address: 753 ARTHUR GODFREY RD MIAMI BEACH FL 33140 Date Received & Ref : 03/29/21 01S41502001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017205**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01136719

Document Type: Invoice

Reference Date: 11/05/20

Lot Number	Quantity	Unique Serial #
526T	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/04/20 PO#01210470

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/05/20 RC#015085

**SOLD TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Purchased &amp; Ref : 11/05/20 01S33507003

**SHIPPED TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Received &amp; Ref : 11/05/20 01S33507003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017206**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36719

Document Type: Invoice

Reference Date: 11/05/20

Lot Number	Quantity	Unique Serial #
2Y7S	1	
CG8M	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/04/20 PO#01210470	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/05/20 RC#015085
<b>SOLD TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Purchased & Ref : 11/05/20 01S33507003	<b>SHIPPED TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Received & Ref : 11/05/20 01S33507003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017205**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01136999

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
X46V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/04/20 PO#01210470	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/05/20 RC#015085
<b>SOLD TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Purchased & Ref : 11/09/20 01S33915001	<b>SHIPPED TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Received & Ref : 11/09/20 01S33915001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39572

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
SY7L	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Purchased &amp; Ref : 12/15/20 01S35864001

**SHIPPED TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Received &amp; Ref : 12/15/20 01S35864001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139572

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
VW6H	1	
YR8X	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015911

**SOLD TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Purchased &amp; Ref : 12/15/20 01S35864001

**SHIPPED TO:**

Name: WORLD PHARMACY

Address: 7339 EL CAJON BLVD.

LA MESA CA 91942

Date Received &amp; Ref : 12/15/20 01S35864001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018789**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01140178

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
19MG726	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Purchased & Ref : 12/28/20 01S35864002	<b>SHIPPED TO:</b> Name: WORLD PHARMACY Address: 7339 EL CAJON BLVD. LA MESA CA 91942 Date Received & Ref : 12/28/20 01S35864002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017095**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01136664
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 11/05/20
VH3K	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210378	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014972
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 11/05/20 01S32416003	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 11/05/20 01S32416003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017349**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01137042

Document Type: Invoice

Reference Date: 11/10/20

Lot Number	Quantity	Unique Serial #
LX8Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/06/20 PO#01210524

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/09/20 RC#015151

**SOLD TO:**

Name: 424 NEIGHBORHOOD PHARMACY

Address: 424 SUTTER AVENUE

BROOKLYN NY 11212

Date Purchased &amp; Ref : 11/10/20 01S33932001

**SHIPPED TO:**

Name: 424 NEIGHBORHOOD PHARMACY

Address: 424 SUTTER AVENUE

BROOKLYN NY 11212

Date Received &amp; Ref : 11/10/20 01S33932001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018006**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01138774

Document Type: Invoice

Reference Date: 12/07/20

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015589
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 12/07/20 01S35396001	<b>SHIPPED TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 12/07/20 01S35396001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39592

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
RJ9G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015906
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 12/16/20 01S35400001	<b>SHIPPED TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 12/16/20 01S35400001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39594

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
RJ9A	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: 424 NEIGHBORHOOD PHARMACY

Address: 424 SUTTER AVENUE

BROOKLYN NY 11212

Date Purchased &amp; Ref : 12/16/20 01S35325001

**SHIPPED TO:**

Name: 424 NEIGHBORHOOD PHARMACY

Address: 424 SUTTER AVENUE

BROOKLYN NY 11212

Date Received &amp; Ref : 12/16/20 01S35325001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018485**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)**

NDC: 00006-0227-61

Reference Number: 01I39617

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
T024073	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015907
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 12/16/20 01S36051001	<b>SHIPPED TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 12/16/20 01S36051001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018485**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I39794

Document Type: Invoice

Reference Date: 12/18/20

Lot Number	Quantity	Unique Serial #
T024536	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015907
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 12/18/20 01S36209001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 12/18/20 01S36209001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018479**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;</b>			Reference Number: <u>01I40180</u>
NDC: 59676-0575-30			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>12/28/20</u>
20KG337	1		

**(TH) Transaction History**

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/14/20</b> <b>PO#01211084</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/15/20</b> <b>RC#015901</b>
<b>SOLD TO:</b> Name: <b>424 NEIGHBORHOOD PHARMACY</b> Address: <b>424 SUTTER AVENUE</b> <b>BROOKLYN NY 11212</b> Date Purchased & Ref : <b>12/28/20</b> <b>01S36419001</b>	<b>SHIPPED TO:</b> Name: <b>424 NEIGHBOORHOOD PHARMACY</b> Address: <b>424 SUTTER AVENUE</b> <b>BROOKLYN NY 11212</b> Date Received & Ref : <b>12/28/20</b> <b>01S36419001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41733

Document Type: Invoice

Reference Date: 01/25/21

Lot Number	Quantity	Unique Serial #
19LG609	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 01/25/21 01S37973001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 01/25/21 01S37973001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019872**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I42031

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
S037643	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 01/28/21 01S38212001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 01/28/21 01S38212001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43581

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
20DG048	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017224
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 02/23/21 01S39587001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 02/23/21 01S39587001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I43881

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
T032792	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/01/21 01S39881001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/01/21 01S39881001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144502

Document Type: Invoice

Reference Date: 03/09/21

Lot Number	Quantity	Unique Serial #
CJ4V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/09/21 01S40412001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/09/21 01S40412001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTL

NDC: 59676-0800-30

Reference Number: 01I44693

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
20GG131	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/11/21 01S40601001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/11/21 01S40601001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01145220
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/19/21
BV4B	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/19/21 PO#01212358	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/19/21 RC#017730
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/19/21 01S41042001	<b>SHIPPED TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/19/21 01S41042001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45285

Document Type: Invoice

Reference Date: 03/22/21

Lot Number	Quantity	Unique Serial #
20LG390	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/22/21 01S41077001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/22/21 01S41077001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021686**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01145337

Document Type: Invoice

Reference Date: 03/22/21

Lot Number	Quantity	Unique Serial #
T036715	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/19/21 PO#01212358	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/19/21 RC#017730
<b>SOLD TO:</b> Name: 424 NEIGHBORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Purchased & Ref : 03/22/21 01S41143001	<b>SHIPPED TO:</b> Name: 424 NEIGHBOORHOOD PHARMACY Address: 424 SUTTER AVENUE BROOKLYN NY 11212 Date Received & Ref : 03/22/21 01S41143001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45223

Document Type: Invoice

Reference Date: 03/19/21

Lot Number	Quantity	Unique Serial #
20LG388	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: METROMEDS PHARMACY LLC Address: 409 E MICHIGAN STREET ORLANDO FL 32806 Date Purchased & Ref : 03/19/21 01S41047001	<b>SHIPPED TO:</b> Name: METROMEDS PHARMACY Address: 409 E MICHIGAN STREET ORLANDO FL 32806 Date Received & Ref : 03/19/21 01S41047001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43925

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE ROAD #150 NOVI MI 48377 Date Purchased & Ref : 03/01/21 01S39916001	<b>SHIPPED TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE RD #150 NOVI MI 48377 Date Received & Ref : 03/01/21 01S39916001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016990**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I35865

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
19GG387	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014885
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 10/23/20 01S32955001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 10/23/20 01S32955001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
19HG421	9	
19KG528	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017339**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
S006926	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017688**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
S008129	2	
S022383	1	
S018432	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017688**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)**

NDC: 00006-0227-61

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
T008120	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017842**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01138350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
UC3R	8	
UD4D	3	
V79D	4	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/24/20 PO#01210770	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/25/20 RC#015460
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
20EG087	1	
20BG904	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/19/20 PO#01210702

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/20/20 RC#015400

**SOLD TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Purchased &amp; Ref : 11/30/20 01S35027001

**SHIPPED TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Received &amp; Ref : 11/30/20 01S35027001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017838**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I38350

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
20BG904	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/24/20 PO#01210770	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/25/20 RC#015460
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 11/30/20 01S35027001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 11/30/20 01S35027001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018479**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I39611

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
19MG718	2	
20CG935	2	
20CG988	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015901
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 12/16/20 01S36018001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 12/16/20 01S36018001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018479**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I39611

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
20EG106	1	
20GG117	2	
20HG193	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015901
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 12/16/20 01S36018001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 12/16/20 01S36018001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018479**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I39611

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
20HG205	1	
20JG269	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015901
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 12/16/20 01S36018001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 12/16/20 01S36018001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41262

Document Type: Invoice

Reference Date: 01/15/21

Lot Number	Quantity	Unique Serial #
20JG267	3	
20KG334	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/15/21 01S37570001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/15/21 01S37570001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I42169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
19LG609	1	
19MG715	1	
19MG718	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I42169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20AG852	2	
20CG935	1	
20CG988	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I42169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20DG048	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019879**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I42169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20EG104	1	
20DG027X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
BV3V	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Purchased &amp; Ref : 01/29/21 01S38316001

**SHIPPED TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Received &amp; Ref : 01/29/21 01S38316001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019595**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01142169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
KBL0000	1	
KDL0001	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019872**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)**

NDC: 00006-0227-61

Reference Number: 01142169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
T013564	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01142169

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
T010083	1	
T015806	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 01/29/21 01S38316001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 01/29/21 01S38316001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
AP7Y	4	
GH3U	4	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
20KG334	5	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020660**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I43870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
2T4G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Purchased &amp; Ref : 02/26/21 01S39858001

**SHIPPED TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Received &amp; Ref : 02/26/21 01S39858001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143870
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/26/21
BV3V	5		
GS5G	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
20HG204	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
T021331	1	
T024073	1	
T024536	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020438**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01143870

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
KFL0000	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 02/26/21 01S39858001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 02/26/21 01S39858001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43971

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20KG337	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/01/21 01S39929001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/01/21 01S39929001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021020**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I43971

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20JG278	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/01/21 PO#01212108

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/01/21 RC#017381

**SOLD TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Purchased &amp; Ref : 03/01/21 01S39929001

**SHIPPED TO:**

Name: PROSPERITY PHARMACY MANASSAS

Address: 8644 SUDLEY ROAD #120

MANASSAS VA 20110

Date Received &amp; Ref : 03/01/21 01S39929001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144247

Document Type: Invoice

Reference Date: 03/04/21

Lot Number	Quantity	Unique Serial #
T040169	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/04/21 01S40201001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/04/21 01S40201001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020458**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144247

Document Type: Invoice

Reference Date: 03/04/21

Lot Number	Quantity	Unique Serial #
T036714	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/15/21 RC#017082
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/04/21 01S40201001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/04/21 01S40201001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021294**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144881

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
T040169	3	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017536
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/15/21 01S40729001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/15/21 01S40729001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I44881

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
T036714	5	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/15/21 01S40729001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/15/21 01S40729001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44881

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
20LG396	3	
20LG431	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/15/21 01S40729001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/15/21 01S40729001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I46007

Document Type: Invoice

Reference Date: 03/31/21

Lot Number	Quantity	Unique Serial #
20LG390	4	
20LG391	6	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017224
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/31/21 01S41748001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/31/21 01S41748001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021824**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01146007

Document Type: Invoice

Reference Date: 03/31/21

Lot Number	Quantity	Unique Serial #
T036715	1	
T040170	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Purchased & Ref : 03/31/21 01S41748001	<b>SHIPPED TO:</b> Name: PROSPERITY PHARMACY MANASSAS Address: 8644 SUDLEY ROAD #120 MANASSAS VA 20110 Date Received & Ref : 03/31/21 01S41748001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I45616

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
T42G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: THOMPSON'S LAKE COUNTRY DRUG INC

Address: PO BOX 2

ISLE MN 56342

Date Purchased &amp; Ref : 03/26/21 01S41397001

**SHIPPED TO:**

Name: THOMPSON'S LAKE COUNTRY DRUG INC

Address: 205 MAIN STREET W

ISLE MN 56342

Date Received &amp; Ref : 03/26/21 01S41397001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021830**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I45616

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
JFL3900A	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: PO BOX 2 ISLE MN 56342 Date Purchased & Ref : 03/26/21 01S41397001	<b>SHIPPED TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: 205 MAIN STREET W ISLE MN 56342 Date Received & Ref : 03/26/21 01S41397001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020660**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I43810

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: PO BOX 2 ISLE MN 56342 Date Purchased & Ref : 02/26/21 01S39798001	<b>SHIPPED TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: 205 MAIN STREET W ISLE MN 56342 Date Received & Ref : 02/26/21 01S39798001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143810

Document Type: Invoice

Reference Date: 02/26/21

Lot Number	Quantity	Unique Serial #
AP7Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: PO BOX 2 ISLE MN 56342 Date Purchased & Ref : 02/26/21 01S39798001	<b>SHIPPED TO:</b> Name: THOMPSON'S LAKE COUNTRY DRUG INC Address: 205 MAIN STREET W ISLE MN 56342 Date Received & Ref : 02/26/21 01S39798001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016289**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33946

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
CG8M	1	
2Y7S	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/28/20 PO#01209895

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/28/20 RC#014373

**SOLD TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Purchased &amp; Ref : 09/28/20 01S30291003

**SHIPPED TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Received &amp; Ref : 09/28/20 01S30291003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016149**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I34091

Document Type: Invoice

Reference Date: 09/29/20

Lot Number	Quantity	Unique Serial #
RJ9G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/21/20 PO#01209825	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/22/20 RC#014294
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 09/29/20 01S31178002	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 09/29/20 01S31178002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017348**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36888

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
GB2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/06/20 PO#01210524

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/09/20 RC#015151

**SOLD TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Purchased &amp; Ref : 11/09/20 01S33639005

**SHIPPED TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Received &amp; Ref : 11/09/20 01S33639005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017348**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36980

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
SY7L	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/06/20 PO#01210524

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/09/20 RC#015151

**SOLD TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Purchased &amp; Ref : 11/09/20 01S33879001

**SHIPPED TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Received &amp; Ref : 11/09/20 01S33879001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017526**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I37703

Document Type: Invoice

Reference Date: 11/19/20

Lot Number	Quantity	Unique Serial #
19KG534	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 11/19/20 01S34511001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 11/19/20 01S34511001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018276**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I39058

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
CJ4U	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/07/20 PO#01210948

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/09/20 RC#015738

**SOLD TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Purchased &amp; Ref : 12/09/20 01S33879002

**SHIPPED TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Received &amp; Ref : 12/09/20 01S33879002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018277**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I39435

Document Type: Invoice

Reference Date: 12/14/20

Lot Number	Quantity	Unique Serial #
20KG334	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015739
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 12/14/20 01S35909001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 12/14/20 01S35909001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39543

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
T96C	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015906
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 12/15/20 01S35909002	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 12/15/20 01S35909002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018789**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01140131

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 12/28/20 01S36255001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 12/28/20 01S36255001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019051**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
TIVICAY-TAB-10MG-30CT,

NDC: 49702-0226-13

Reference Number: 01I40722

Document Type: Invoice

Reference Date: 01/07/21

Lot Number	Quantity	Unique Serial #
UH7X	1	

**(TH) Transaction History**Manufacturer's Name: VIIV HEALTHCARE  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 01/07/21 01S36999001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 01/07/21 01S36999001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41313

Document Type: Invoice

Reference Date: 01/18/21

Lot Number	Quantity	Unique Serial #
20KG334	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 01/18/21 01S37610001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 01/18/21 01S37610001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42011

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20GG129	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 01/28/21 01S37610002	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 01/28/21 01S37610002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142081

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
RJ9G	1	
SH7B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 01/28/21 01S37610003	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 01/28/21 01S37610003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020444**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43134

Document Type: Invoice

Reference Date: 02/16/21

Lot Number	Quantity	Unique Serial #
20CG935	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 02/16/21 01S39261001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 02/16/21 01S39261001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01143747

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
19MG727X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 02/25/21 01S39770001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 02/25/21 01S39770001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143747

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
Y22W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Purchased &amp; Ref : 02/25/21 01S39770001

**SHIPPED TO:**

Name: FIVE POINTS PHARMACY AND WELLNESS

Address: 1108 LAKE DRIVE

COCOA FL 32922

Date Received &amp; Ref : 02/25/21 01S39770001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I44389

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
20KG337	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Purchased & Ref : 03/08/21 01S40344001	<b>SHIPPED TO:</b> Name: FIVE POINTS PHARMACY AND WELLNESS Address: 1108 LAKE DRIVE COCOA FL 32922 Date Received & Ref : 03/08/21 01S40344001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017689**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I39242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
IKL3I00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01I39242

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
JCL8900	1	
JCL8B00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017539**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I39242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
JCL8C01	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015306
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018340**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)**

NDC: S00006-0227-61

Reference Number: 01I39242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
S000158	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/10/20 PO#01211040	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/10/20 RC#015788
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018277**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I39242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
20JG269	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015739
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018282**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I39242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
20JG257	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015744
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017685**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01139242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
20HG207	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139242

Document Type: Invoice

Reference Date: 12/11/20

Lot Number	Quantity	Unique Serial #
7N9K	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015740
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/11/20 01S35779002	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/11/20 01S35779002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018485**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I39601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
T021331	1	
T018246	1	
T024073	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015907
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018485**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)</b>			Reference Number: <u>01I39601</u>
NDC: 00006-0227-61			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>12/16/20</u>
T030722	3		
T032791	1		

**(TH) Transaction History**

Manufacturer's Name: **MERCK SHARP & DOHME**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/14/20</b> <b>PO#01211084</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/15/20</b> <b>RC#015907</b>
<b>SOLD TO:</b> Name: <b>PUCCI'S PHARMACY</b> Address: <b>2821 J ST</b> <b>SACRAMENTO CA 95816</b> Date Purchased & Ref : <b>12/16/20</b> <b>01S35779003</b>	<b>SHIPPED TO:</b> Name: <b>PUCCI'S PHARMACY</b> Address: <b>2821 J ST</b> <b>SACRAMENTO CA 95816</b> Date Received & Ref : <b>12/16/20</b> <b>01S35779003</b>
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018482**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I39601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
19DG258X	1	
19KG576	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015905
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018492**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I39601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
19MG726	1	
19MG727X	1	
20EG062	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015909
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018492**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I39601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
20HG204	2	
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015909
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
KD2R	1	
PG9F	2	
V59A	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139601

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
XW2J	1	
LX8Y	1	
SE9G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref : 12/16/20 01S35779003	<b>SHIPPED TO:</b> Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref : 12/16/20 01S35779003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I33945

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
T95G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/28/20 PO#01209895

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/28/20 RC#014370

**SOLD TO:**

Name: PRESTIGE SPECIALTY PHARMACY

Address: 3739 15 MILE ROAD

STERLING HEIGHTS MI 48310

Date Purchased &amp; Ref : 09/28/20 01S29373004

**SHIPPED TO:**

Name: PRESTIGE SPECIALTY PHARMACY

Address: 3739 15 MILE ROAD

STERLING HEIGHTS MI 48310

Date Received &amp; Ref : 09/28/20 01S29373004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021291**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01144414

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
TP5Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017534

**SOLD TO:**

Name: PRESTIGE SPECIALTY PHARMACY

Address: 3739 15 MILE ROAD

STERLING HEIGHTS MI 48310

Date Purchased &amp; Ref : 03/08/21 01S39927001

**SHIPPED TO:**

Name: PRESTIGE SPECIALTY PHARMACY

Address: 3739 15 MILE ROAD

STERLING HEIGHTS MI 48310

Date Received &amp; Ref : 03/08/21 01S39927001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021819**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I45645

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
KE3G	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: PRESTIGE SPECIALTY PHARMACY Address: 3739 15 MILE ROAD STERLING HEIGHTS MI 48310 Date Purchased & Ref : 03/26/21 01S39927002	<b>SHIPPED TO:</b> Name: PRESTIGE SPECIALTY PHARMACY Address: 3739 15 MILE ROAD STERLING HEIGHTS MI 48310 Date Received & Ref : 03/26/21 01S39927002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143635

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
7N9J	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: CAPITOL DRUGS Address: 8578 SANTA MONICA BLVD WEST HOLLYWOOD CA 90069 Date Purchased & Ref : 02/24/21 01S39642001	<b>SHIPPED TO:</b> Name: CAPITOL DRUGS Address: 8578 SANTA MONICA BLVD WEST HOLLYWOOD CA 90069 Date Received & Ref : 02/24/21 01S39642001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143635

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
SY7D	3	
SY7L	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: CAPITOL DRUGS Address: 8578 SANTA MONICA BLVD WEST HOLLYWOOD CA 90069 Date Purchased & Ref : 02/24/21 01S39642001	<b>SHIPPED TO:</b> Name: CAPITOL DRUGS Address: 8578 SANTA MONICA BLVD WEST HOLLYWOOD CA 90069 Date Received & Ref : 02/24/21 01S39642001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018008**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01138921

Document Type: Invoice

Reference Date: 12/08/20

Lot Number	Quantity	Unique Serial #
354K	1	
7N9J	1	
7N9K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015589
<b>SOLD TO:</b> Name: CIENEGA PHARMACY Address: 7360 SANTA MONICA BLVD #101 WEST HOLLYWOOD CA 90046 Date Purchased & Ref : 12/08/20 01S35521001	<b>SHIPPED TO:</b> Name: CIENEGA PHARMACY Address: 7360 SANTA MONICA BLVD #101 WEST HOLLYWOOD CA 90046 Date Received & Ref : 12/08/20 01S35521001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018008**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01138921

Document Type: Invoice

Reference Date: 12/08/20

Lot Number	Quantity	Unique Serial #
V79D	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/01/20 PO#01210838

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/02/20 RC#015589

**SOLD TO:**

Name: CIENEGA PHARMACY

Address: 7360 SANTA MONICA BLVD #101

WEST HOLLYWOOD CA 90046

Date Purchased &amp; Ref : 12/08/20 01S35521001

**SHIPPED TO:**

Name: CIENEGA PHARMACY

Address: 7360 SANTA MONICA BLVD #101

WEST HOLLYWOOD CA 90046

Date Received &amp; Ref : 12/08/20 01S35521001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019598**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**MAVYRET TAB 84CT,**

NDC: 00074-2625-28

Reference Number: 01I42547Document Type: InvoiceReference Date: 02/08/21

Lot Number	Quantity	Unique Serial #
1114861	1	

**(TH) Transaction History**Manufacturer's Name: **ABBVIE**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **01/21/21 PO#01211610****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **01/21/21 RC#016618****SOLD TO:**Name: **SRX SPECIALTY CARE PHARMACY**Address: **3412 W 13 MILE RD  
ROYAL OAK MI 48073**Date Purchased & Ref : **02/08/21 01S38753001****SHIPPED TO:**Name: **SRX SPECIALTY CARE PHARMACY**Address: **3412 W 13 MILE RD  
ROYAL OAK MI 48073**Date Received & Ref : **02/08/21 01S38753001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020455**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
SOFOS/VELPA-TB-400/100MG 28CT,

NDC: 72626-2701-01

Lot Number	Quantity	Unique Serial #
20ASV003UA	1	

Reference Number: 01I44664

Document Type: Invoice

Reference Date: 03/11/21

**(TH) Transaction History**Manufacturer's Name: ASEGUA THERAPEUTICS  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD  
ROYAL OAK MI 48073

Date Purchased &amp; Ref : 03/11/21 01S40565001

**SHIPPED TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD  
ROYAL OAK MI 48073

Date Received &amp; Ref : 03/11/21 01S40565001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021051**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
SOFOS/VELPA-TB-400/100MG 28CT,

NDC: 72626-2701-01

Lot Number	Quantity	Unique Serial #
20ASV003UA	1	

Reference Number: 01I44664

Document Type: Invoice

Reference Date: 03/11/21

**(TH) Transaction History**Manufacturer's Name: ASEGUA THERAPEUTICS  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/01/21 PO#01212108

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/02/21 RC#017404

**SOLD TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD

ROYAL OAK MI 48073

Date Purchased &amp; Ref : 03/11/21 01S40565001

**SHIPPED TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD

ROYAL OAK MI 48073

Date Received &amp; Ref : 03/11/21 01S40565001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144949

Document Type: Invoice

Reference Date: 03/16/21

Lot Number	Quantity	Unique Serial #
LN5D	4	
RN2F	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017537

**SOLD TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD

ROYAL OAK MI 48073

Date Purchased &amp; Ref : 03/16/21 01S40797001

**SHIPPED TO:**

Name: SRX SPECIALTY CARE PHARMACY

Address: 3412 W 13 MILE RD

ROYAL OAK MI 48073

Date Received &amp; Ref : 03/16/21 01S40797001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021017**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**MAVYRET TAB 84CT,**

NDC: 00074-2625-28

Reference Number: 01I45014Document Type: InvoiceReference Date: 03/17/21

Lot Number	Quantity	Unique Serial #
1120280	1	

**(TH) Transaction History**Manufacturer's Name: **ABBVIE**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>03/01/21</b> <b>PO#01212108</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>03/01/21</b> <b>RC#017381</b>
<b>SOLD TO:</b> Name: <b>SRX SPECIALTY CARE PHARMACY</b> Address: <b>3412 W 13 MILE RD</b> <b>ROYAL OAK MI 48073</b> Date Purchased & Ref : <b>03/17/21</b> <b>01S40876001</b>	<b>SHIPPED TO:</b> Name: <b>SRX SPECIALTY CARE PHARMACY</b> Address: <b>3412 W 13 MILE RD</b> <b>ROYAL OAK MI 48073</b> Date Received & Ref : <b>03/17/21</b> <b>01S40876001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021297**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**MAVYRET TAB 84CT,**

NDC: 00074-2625-28

Lot Number	Quantity	Unique Serial #
1123457	1	

Reference Number: 01I45014Document Type: InvoiceReference Date: 03/17/21**(TH) Transaction History**Manufacturer's Name: **ABBVIE**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **03/08/21 PO#01212210****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **03/08/21 RC#017537****SOLD TO:**Name: **SRX SPECIALTY CARE PHARMACY**Address: **3412 W 13 MILE RD  
ROYAL OAK MI 48073**Date Purchased & Ref : **03/17/21 01S40876001****SHIPPED TO:**Name: **SRX SPECIALTY CARE PHARMACY**Address: **3412 W 13 MILE RD  
ROYAL OAK MI 48073**Date Received & Ref : **03/17/21 01S40876001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017095**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01136204

Document Type: Invoice

Reference Date: 10/29/20

Lot Number	Quantity	Unique Serial #
NB8J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210378	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014972
<b>SOLD TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Purchased & Ref : 10/29/20 01S31380003	<b>SHIPPED TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Received & Ref : 10/29/20 01S31380003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017093**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36205

Document Type: Invoice

Reference Date: 10/29/20

Lot Number	Quantity	Unique Serial #
WS3J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210379	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014968
<b>SOLD TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Purchased & Ref : 10/29/20 01S33005002	<b>SHIPPED TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Received & Ref : 10/29/20 01S33005002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017348**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36981

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
T96C	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/06/20 PO#01210524

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/09/20 RC#015151

**SOLD TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Purchased &amp; Ref : 11/09/20 01S33800001

**SHIPPED TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Received &amp; Ref : 11/09/20 01S33800001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017348**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36982

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
PN5E	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Purchased & Ref : 11/09/20 01S33664002	<b>SHIPPED TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Received & Ref : 11/09/20 01S33664002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39558

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
SY7L	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Purchased &amp; Ref : 12/15/20 01S35813002

**SHIPPED TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Received &amp; Ref : 12/15/20 01S35813002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39680

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
RJ9G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Purchased &amp; Ref : 12/16/20 01S36080001

**SHIPPED TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Received &amp; Ref : 12/16/20 01S36080001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01139680
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/16/20
V79D	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Purchased & Ref : 12/16/20 01S36080001	<b>SHIPPED TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Received & Ref : 12/16/20 01S36080001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018790**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140140

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
GB2B	4	
RW9Y	1	
T96C	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/23/20 PO#01211221

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/28/20 RC#016109

**SOLD TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Purchased &amp; Ref : 12/28/20 01S36080004

**SHIPPED TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Received &amp; Ref : 12/28/20 01S36080004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018790**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140140

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
VN7P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/23/20 PO#01211221

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/28/20 RC#016109

**SOLD TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Purchased &amp; Ref : 12/28/20 01S36080004

**SHIPPED TO:**

Name: OTHELLO STATION PHARMACY

Address: 4219 S OTHELLO ST. #105F

SEATTLE WA 98118

Date Received &amp; Ref : 12/28/20 01S36080004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142094

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
JB5R	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Purchased & Ref : 01/28/21 01S37729001	<b>SHIPPED TO:</b> Name: OTHELLO STATION PHARMACY Address: 4219 S OTHELLO ST. #105F SEATTLE WA 98118 Date Received & Ref : 01/28/21 01S37729001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019046**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I40557

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
20DG026	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: HEALTHMAX PHARMACY Address: 80-07 JAMAICA AVENUE WOODHAVEN NY 11421 Date Purchased & Ref : 01/06/21 01S36772001	<b>SHIPPED TO:</b> Name: HEALTHMAX PHARMACY Address: 80-07 JAMAICA AVENUE WOODHAVEN NY 11421 Date Received & Ref : 01/06/21 01S36772001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019052**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01140557
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 01/06/21
UC3R	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: HEALTHMAX PHARMACY Address: 80-07 JAMAICA AVENUE WOODHAVEN NY 11421 Date Purchased & Ref : 01/06/21 01S36772001	<b>SHIPPED TO:</b> Name: HEALTHMAX PHARMACY Address: 80-07 JAMAICA AVENUE WOODHAVEN NY 11421 Date Received & Ref : 01/06/21 01S36772001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41109

Document Type: Invoice

Reference Date: 01/14/21

Lot Number	Quantity	Unique Serial #
20JG269	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/14/21 01S37411001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/14/21 01S37411001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019623**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01141599

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
7N9K	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37411002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37411002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019607**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I41628

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
682H	1	
Y22X	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016622
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37137003	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37137003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I41677

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
T013565	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/22/21 01S37896001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/22/21 01S37896001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41677

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
20JG278	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/22/21 01S37896001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/22/21 01S37896001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019716**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41844Document Type: InvoiceReference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
19CG205	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/25/21</b> <b>PO#01211652</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/25/21</b> <b>RC#016683</b>
<b>SOLD TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Purchased & Ref : <b>01/26/21</b> <b>01S38070001</b>	<b>SHIPPED TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Received & Ref : <b>01/26/21</b> <b>01S38070001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41844

Document Type: Invoice

Reference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
20JG278	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/26/21 01S38070001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/26/21 01S38070001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42036

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S37896002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S37896002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I42047

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20GG117	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S38227001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S38227001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**COMBIVENT RESPIMAT 20/100M-120PUFF , 20; 100 ug/1; ug/1, SPRAY, METERED, 1 CARTRIDGE in 1 CARTON (0597-0024-**

NDC: 00597-0024-02

Reference Number: 01142047

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
905594C	1	

**(TH) Transaction History**

Manufacturer's Name: BOEHRINGER INGELHEIM

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/22/21 PO#01211634	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/25/21 RC#016680
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S38227001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S38227001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019084**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**COMBIVENT RESPIMAT 20/100M-120PUFF , 20; 100 ug/1; ug/1, SPRAY, METERED, 1 CARTRIDGE in 1 CARTON (0597-0024-**

NDC: 00597-0024-02

Reference Number: 01142047

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
001230C	1	
001962A	1	

**(TH) Transaction History**

Manufacturer's Name: BOEHRINGER INGELHEIM

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/07/21 PO#01211363	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/07/21 RC#016301
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/28/21 01S38227001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/28/21 01S38227001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142084

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
2Y6Y	1	
RA5C	1	
XB9B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 01/28/21 01S37411003

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 01/28/21 01S37411003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020450**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142949

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
682H	2	
AP7Y	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38227002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38227002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020446**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01142989

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
20LG416	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38999002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38999002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142989

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
BV3W	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38999002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38999002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: <u>01142991</u>
NDC: 49702-0231-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>02/12/21</u>
BV3W	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/12/21 01S38804002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/12/21 01S38804002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143014

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
BV3V	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 02/15/21 01S39158001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 02/15/21 01S39158001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020651**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01143460

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
TP5Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017222

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 02/22/21 01S37230001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 02/22/21 01S37230001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020651**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I43462

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
8L4J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017222

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 02/22/21 01S37411005

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 02/22/21 01S37411005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020679**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01143554
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/23/21
A65T	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 02/23/21 01S37411006	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 02/23/21 01S37411006
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021020**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44003

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/02/21 01S39944001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/02/21 01S39944001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020660**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I44011

Document Type: Invoice

Reference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
20LG416	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/02/21 01S39761003	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/02/21 01S39761003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020379**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**AMITIZA-CAP-24MCP-60CT,**

NDC: 64764-0240-60

Lot Number	Quantity	Unique Serial #
3263568-61	1	

Reference Number: 01I44270Document Type: InvoiceReference Date: 03/05/21**(TH) Transaction History**Manufacturer's Name: **TAKEDA PHARMACEUTICALS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **02/11/21 PO#01211916****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **02/12/21 RC#017067****SOLD TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD****MIAMI BEACH FL 33139**Date Purchased & Ref : **03/05/21 01S40217001****SHIPPED TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD****MIAMI BEACH FL 33139**Date Received & Ref : **03/05/21 01S40217001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01144270

Document Type: Invoice

Reference Date: 03/05/21

Lot Number	Quantity	Unique Serial #
20KG332	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/05/21 01S40217001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/05/21 01S40217001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019889**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45330

Document Type: Invoice

Reference Date: 03/22/21

Lot Number	Quantity	Unique Serial #
20LG390	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/22/21 01S41115001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/22/21 01S41115001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021613**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
VASCEPA 1GM CAP 120CT,

NDC: 52937-0001-20

Lot Number	Quantity	Unique Serial #
8M03950	3	

Reference Number: 01I45330

Document Type: Invoice

Reference Date: 03/22/21

**(TH) Transaction History**Manufacturer's Name: AMARIN PHARMA  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/18/21 PO#01212348

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/18/21 RC#017703

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD  
MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/22/21 01S41115001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD  
MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/22/21 01S41115001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021830**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01145768

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
JFL6V00A	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/29/21 01S41498001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/29/21 01S41498001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021416**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**ROZEREM-TAB-8MG-30CT,**

NDC: 64764-0805-30

Reference Number: 01I45768Document Type: InvoiceReference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
P27772	1	

**(TH) Transaction History**Manufacturer's Name: **TAKEDA PHARMACEUTICALS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **03/11/21 PO#01212260****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **03/11/21 RC#017594****SOLD TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD  
MIAMI BEACH FL 33139**Date Purchased & Ref : **03/29/21 01S41498001****SHIPPED TO:**Name: **MODERN PHARMACY LLC**Address: **123 ALTON ROAD  
MIAMI BEACH FL 33139**Date Received & Ref : **03/29/21 01S41498001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021837**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01145768

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
RV5B	1	
XC8B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Purchased &amp; Ref : 03/29/21 01S41498001

**SHIPPED TO:**

Name: MODERN PHARMACY LLC

Address: 123 ALTON ROAD

MIAMI BEACH FL 33139

Date Received &amp; Ref : 03/29/21 01S41498001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021825**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01145885
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/30/21
MW5J	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020375**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

VENTOLIN INHALER 90 MCG, 90 ug/1, AEROSOL, METERED, 1 INHALER in 1 CARTON (0173-0682-20) &gt; 200 AEROSOL, ME

NDC: S00173-0682-20

Reference Number: 01145885

Document Type: Invoice

Reference Date: 03/30/21

Lot Number	Quantity	Unique Serial #
Y63P	1	

**(TH) Transaction History**

Manufacturer's Name: GLAXO SMITH KLINE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211907	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/11/21 RC#017065
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020568**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

VENTOLIN INHALER 90 MCG, 90 ug/1, AEROSOL, METERED, 1 INHALER in 1 CARTON (0173-0682-20) &gt; 200 AEROSOL, ME

NDC: S00173-0682-20

Reference Number: 01I45885

Document Type: Invoice

Reference Date: 03/30/21

Lot Number	Quantity	Unique Serial #
Y63P	1	

**(TH) Transaction History**

Manufacturer's Name: GLAXO SMITH KLINE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/17/21 PO#01211985	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/17/21 RC#017151
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 03/30/21 01S41571002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 03/30/21 01S41571002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017536**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01137561

Document Type: Invoice

Reference Date: 11/17/20

Lot Number	Quantity	Unique Serial #
20JG278	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015306
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 11/17/20 01S34361001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 11/17/20 01S34361001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017529**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01137561

Document Type: Invoice

Reference Date: 11/17/20

Lot Number	Quantity	Unique Serial #
20HG204	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 11/17/20 01S34361001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 11/17/20 01S34361001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017841**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I38182

Document Type: Invoice

Reference Date: 11/25/20

Lot Number	Quantity	Unique Serial #
689Y	2	
8N2Y	2	
WF2G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/24/20 PO#01210770

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/25/20 RC#015460

**SOLD TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Purchased &amp; Ref : 11/25/20 01S34361002

**SHIPPED TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Received &amp; Ref : 11/25/20 01S34361002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017895**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)			Reference Number: 01I38357
NDC: S00006-0227-61			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 11/30/20
S008130	1		
S007958	1		

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP & DOHME  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/30/20 PO#01210809	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/30/20 RC#015545
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 11/30/20 01S35039001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 11/30/20 01S35039001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017897**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: S00006-0227-61

Reference Number: 01I38357

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
S008147	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/30/20 PO#01210813	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/30/20 RC#015546
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 11/30/20 01S35039001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 11/30/20 01S35039001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017872**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: S00006-0227-61

Reference Number: 01I38357

Document Type: Invoice

Reference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
S008130	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/27/20 PO#01210784	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/27/20 RC#015530
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 11/30/20 01S35039001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 11/30/20 01S35039001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017896**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZISTA 800MG TAB 30CT,**

NDC: 59676-0566-30

Reference Number: 01I38357Document Type: InvoiceReference Date: 11/30/20

Lot Number	Quantity	Unique Serial #
19DG241	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>11/30/20</b> <b>PO#01210809</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>11/30/20</b> <b>RC#015545</b>
<b>SOLD TO:</b> Name: <b>LIN PHARMACY INC</b> Address: <b>22404 LINDEN BLVD</b> <b>CAMBRIA HEIGHTS NY 11411</b> Date Purchased & Ref : <b>11/30/20</b> <b>01S35039001</b>	<b>SHIPPED TO:</b> Name: <b>LIN PHARMACY INC</b> Address: <b>22404 LINDEN BLVD</b> <b>CAMBRIA HEIGHTS NY 11411</b> Date Received & Ref : <b>11/30/20</b> <b>01S35039001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018791**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140159

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
UC3R	1	
UD4D	3	
V79D	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 12/28/20 01S36484001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 12/28/20 01S36484001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143541

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
7J4V	1	
EM3E	1	
HN9W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Purchased &amp; Ref : 02/23/21 01S39220001

**SHIPPED TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Received &amp; Ref : 02/23/21 01S39220001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143541

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
JP7D	1	
RA5C	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 02/23/21 01S39220001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 02/23/21 01S39220001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143787

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
BV3V	2	
BV3W	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 02/25/21 01S39781001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 02/25/21 01S39781001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020653**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01143787

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
KFL7500	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 02/25/21 01S39781001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 02/25/21 01S39781001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43787

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
19MG727X	2	
20EG062	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 02/25/21 01S39781001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 02/25/21 01S39781001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020674**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I43787

Document Type: Invoice

Reference Date: 02/25/21

Lot Number	Quantity	Unique Serial #
20JG267	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017224
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 02/25/21 01S39781001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 02/25/21 01S39781001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021305**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01144436

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
7N9J	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 03/08/21 01S40348002	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 03/08/21 01S40348002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021345**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I44542Document Type: InvoiceReference Date: 03/09/21

Lot Number	Quantity	Unique Serial #
19JG470	2	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>03/09/21</b> <b>PO#01212238</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>03/09/21</b> <b>RC#017557</b>
<b>SOLD TO:</b> Name: <b>LIN PHARMACY INC</b> Address: <b>22404 LINDEN BLVD</b> <b>CAMBRIA HEIGHTS NY 11411</b> Date Purchased & Ref : <b>03/09/21</b> <b>01S40423001</b>	<b>SHIPPED TO:</b> Name: <b>LIN PHARMACY INC</b> Address: <b>22404 LINDEN BLVD</b> <b>CAMBRIA HEIGHTS NY 11411</b> Date Received & Ref : <b>03/09/21</b> <b>01S40423001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021314**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I44866

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
20LG374X	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/09/21 RC#017542
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 03/15/21 01S40720001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 03/15/21 01S40720001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I44866

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
FU5E	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017537

**SOLD TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Purchased &amp; Ref : 03/15/21 01S40720001

**SHIPPED TO:**

Name: LIN PHARMACY INC

Address: 22404 LINDEN BLVD

CAMBRIA HEIGHTS NY 11411

Date Received &amp; Ref : 03/15/21 01S40720001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021820**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DUEXIS TAB 90CT, 800; 26.6 mg/1; mg/1, TABLET, COATED, 90 TABLET, COATED in 1 BOTTLE (75987-010-03)

IBUPROFEN 800MG/ FAMOTIDINE 26.6MG

NDC: 75987-0010-03

Reference Number: 01145711

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
8123904	2	

**(TH) Transaction History**

Manufacturer's Name: HORIZON THERAPEUTICS USA

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 03/26/21 01S41304001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 03/26/21 01S41304001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021827**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PENNSAID 2% TOP SOL 112G BT, 20 mg/g, SOLUTION, 112 g in 1 BOTTLE, PUMP (75987-040-05)

NDC: 75987-0040-05

Reference Number: 01145711

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
A1164B1	3	
A1165A1	2	

**(TH) Transaction History**

Manufacturer's Name: HORIZON THERAPEUTICS USA

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Purchased & Ref : 03/26/21 01S41304001	<b>SHIPPED TO:</b> Name: LIN PHARMACY INC Address: 22404 LINDEN BLVD CAMBRIA HEIGHTS NY 11411 Date Received & Ref : 03/26/21 01S41304001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017338**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01I37860

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 11/20/20

Lot Number	Quantity	Unique Serial #
IKL5N00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: CIENEGA PHARMACY Address: 7360 SANTA MONICA BLVD #101 WEST HOLLYWOOD CA 90046 Date Purchased & Ref : 11/20/20 01S34593001	<b>SHIPPED TO:</b> Name: CIENEGA PHARMACY Address: 7360 SANTA MONICA BLVD #101 WEST HOLLYWOOD CA 90046 Date Received & Ref : 11/20/20 01S34593001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012800**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I26213

Document Type: Invoice

Reference Date: 05/27/20

Lot Number	Quantity	Unique Serial #
19CG184	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208044	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/26/20 RC#012058
<b>SOLD TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Purchased & Ref : 05/27/20 01S24630001	<b>SHIPPED TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Received & Ref : 05/27/20 01S24630001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012801**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26213

Document Type: Invoice

Reference Date: 05/27/20

Lot Number	Quantity	Unique Serial #
SM9N	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 05/22/20 PO#01208044

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 05/26/20 RC#012058

**SOLD TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Purchased &amp; Ref : 05/27/20 01S24630001

**SHIPPED TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Received &amp; Ref : 05/27/20 01S24630001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26525

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
U35F	1	
JP7D	1	
LK9K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/01/20 PO#01208165

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/02/20 RC#012208

**SOLD TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Purchased &amp; Ref : 06/02/20 01S24872002

**SHIPPED TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Received &amp; Ref : 06/02/20 01S24872002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012953**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26525

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
W24V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/29/20 PO#01208117	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/01/20 RC#012165
<b>SOLD TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Purchased & Ref : 06/02/20 01S24872002	<b>SHIPPED TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Received & Ref : 06/02/20 01S24872002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013125**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I27213

Document Type: Invoice

Reference Date: 06/15/20

Lot Number	Quantity	Unique Serial #
19DG231	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Purchased & Ref : 06/15/20 01S25545001	<b>SHIPPED TO:</b> Name: FERNDAL FAMILY PHARMACY Address: 753 W NINE MILE RD FERNDAL MI 48220 Date Received & Ref : 06/15/20 01S25545001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013869**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I28946

Document Type: Invoice

Reference Date: 07/15/20

Lot Number	Quantity	Unique Serial #
LR8B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/30/20 PO#01208658

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/02/20 RC#012811

**SOLD TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Purchased &amp; Ref : 07/15/20 01S27142002

**SHIPPED TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Received &amp; Ref : 07/15/20 01S27142002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014778**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I30311

Document Type: Invoice

Reference Date: 08/04/20

Lot Number	Quantity	Unique Serial #
WK7W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/03/20 PO#01209134

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/04/20 RC#013441

**SOLD TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Purchased &amp; Ref : 08/04/20 01S27985003

**SHIPPED TO:**

Name: FERNDAL FAMILY PHARMACY

Address: 753 W NINE MILE RD

FERNDAL MI 48220

Date Received &amp; Ref : 08/04/20 01S27985003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017691**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

HUMIRA PEN 40MG/0.8ML, , KIT, 2 KIT in 1 CARTON (0074-4339-02) &gt; 1 KIT in 1 KIT \* 1 SYRINGE in 1 TRAY &gt; .8 mL in 1 S'

Reference Number: 01I37965

NDC: 00074-4339-02

Document Type: Invoice

Reference Date: 11/23/20

Lot Number	Quantity	Unique Serial #
1124461	3	

**(TH) Transaction History**

Manufacturer's Name: ABBVIE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 11/23/20 01S34582001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 11/23/20 01S34582001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017690**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
TRULICITY INJECTION 1.5MG/0.5ML,

NDC: 00002-1434-80

Lot Number	Quantity	Unique Serial #
D295249C	1	

Reference Number: 01I37965

Document Type: Invoice

Reference Date: 11/23/20

**(TH) Transaction History**Manufacturer's Name: LILLY  
Manufacturer's information:

**SOLD TO:**  
Name: BOULEVARD 9229 LLC  
Address: 9229 QUEENS BLVD  
REGO PARK NY 11374  
Date Purchased & Ref :

**SHIPPED TO:**  
Name: BOULEVARD 9229 LLC  
Address: 9229 QUEENS BLVD  
REGO PARK NY 11374  
Date Received & Ref :

**SOLD TO:**  
Name: SAFE CHAIN SOLUTIONS, LLC  
Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613  
Date Purchased & Ref : 11/19/20 PO#01210702

**SHIPPED TO:**  
Name: SAFE CHAIN SOLUTIONS  
Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613  
Date Received & Ref : 11/20/20 RC#015400

**SOLD TO:**  
Name: MEADOW DRUGS AND SURGICALS  
Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554  
Date Purchased & Ref : 11/23/20 01S34582001

**SHIPPED TO:**  
Name: MEADOW DRUGS AND SURGICALS  
Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554  
Date Received & Ref : 11/23/20 01S34582001

**SOLD TO:**  
Name:  
Address:  
Date Purchased & Ref :

**SHIPPED TO:**  
Name:  
Address:  
Date Received & Ref :

**SOLD TO:**  
Name:  
Address:  
Date Purchased & Ref :

**SHIPPED TO:**  
Name:  
Address:  
Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017847**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: S00006-0227-61

Reference Number: 01I38192

Document Type: Invoice

Reference Date: 11/25/20

Lot Number	Quantity	Unique Serial #
S012546	3	
S008130	2	
S007958	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/25/20 PO#01210777	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/25/20 RC#015476
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 11/25/20 01S34851001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 11/25/20 01S34851001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I38250

Document Type: Invoice

Reference Date: 11/27/20

Lot Number	Quantity	Unique Serial #
19JG470	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 11/27/20 01S34905001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 11/27/20 01S34905001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017097**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I38434

Document Type: Invoice

Reference Date: 12/02/20

Lot Number	Quantity	Unique Serial #
IIL7200B	1	
ILL2300	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210378	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014972
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 12/02/20 01S35145001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 12/02/20 01S35145001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018012**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Reference Number: 01I38516

Document Type: Invoice

Reference Date: 12/03/20

Lot Number	Quantity	Unique Serial #
T030716	1	
T017747	1	
T017743	1	

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/01/20 PO#01210838

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/02/20 RC#015589

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 12/03/20 01S35155001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 12/03/20 01S35155001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I38646

Document Type: Invoice

Reference Date: 12/03/20

Lot Number	Quantity	Unique Serial #
IGL1300	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 12/03/20 01S35318001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 12/03/20 01S35318001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017995**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I38646

Document Type: Invoice

Reference Date: 12/03/20

Lot Number	Quantity	Unique Serial #
T001235	1	
S037643	2	
T007067	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 12/03/20 01S35318001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 12/03/20 01S35318001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139557

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
WE7K	1	
YK3E	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015911

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 12/15/20 01S35780001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 12/15/20 01S35780001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018669**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Lot Number	Quantity	Unique Serial #
19BG119X	3	

Reference Number: 01I39844Document Type: InvoiceReference Date: 12/21/20**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **12/21/20 PO#01211192****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **12/21/20 RC#016031****SOLD TO:**Name: **MEADOW DRUGS AND SURGICALS**Address: **353 NEWBRIDGE RD  
EAST MEADOW NY 11554**Date Purchased & Ref : **12/21/20 01S36263002****SHIPPED TO:**Name: **MEADOW DRUGS AND SURGICALS**Address: **353 NEWBRIDGE RD  
EAST MEADOW NY 11554**Date Received & Ref : **12/21/20 01S36263002****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018789**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01140122

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
20KG322	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 12/28/20 01S36477001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 12/28/20 01S36477001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018485**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)</b>			Reference Number: <u>01I40455</u>
NDC: 00006-0227-61			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>01/05/21</u>
T024536	2		
T032792	1		

**(TH) Transaction History**

Manufacturer's Name: **MERCK SHARP & DOHME**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/14/20</b> <b>PO#01211084</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/15/20</b> <b>RC#015907</b>
<b>SOLD TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Purchased & Ref : <b>01/05/21</b> <b>01S36759001</b>	<b>SHIPPED TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Received & Ref : <b>01/05/21</b> <b>01S36759001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019039**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Reference Number: 01I40582

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
T019912	1	
T017740	1	
T025058	1	

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016271

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36168001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36168001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019035**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)**

NDC: 00006-3080-01

Reference Number: 01I40584Document Type: InvoiceReference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
T018686	1	

**(TH) Transaction History**Manufacturer's Name: **MERCK SHARP & DOHME**

Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/04/21</b> <b>PO#01211295</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/05/21</b> <b>RC#016271</b>
<b>SOLD TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Purchased & Ref : <b>01/06/21</b> <b>01S35318003</b>	<b>SHIPPED TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Received & Ref : <b>01/06/21</b> <b>01S35318003</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140590

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
652K	1	
689W	1	
885M	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36759002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36759002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140590

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
885T	1	
CJ4V	1	
GB2B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36759002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36759002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140590

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
PN5E	1	
RW9Y	1	
WX8M	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36759002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36759002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140590

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
X49H	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36759002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36759002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I40635

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
682H	1	
AP7Y	4	
SY7D	8	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36878001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36878001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I40635

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
SY7L	1	
Y22W	3	
Y22X	8	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/06/21 01S36878001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/06/21 01S36878001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019600**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Lot Number	Quantity	Unique Serial #
T009398	1	

Reference Number: 01I41574

Document Type: Invoice

Reference Date: 01/21/21

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/21/21 PO#01211610

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/21/21 RC#016618

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/21/21 01S36514002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 01/21/21 01S36514002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41830

Document Type: Invoice

Reference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
20DG048	2	
20EG106	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 01/26/21 01S38034001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 01/26/21 01S38034001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019620**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I41945

Document Type: Invoice

Reference Date: 01/27/21

Lot Number	Quantity	Unique Serial #
JGL2C00	2	
KBL2K00A	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 01/27/21 01S38152001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 01/27/21 01S38152001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019620**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)			Reference Number: 01141946
RILPIVIRINE HCL			Document Type: Invoice
NDC: 59676-0278-01			Reference Date: 01/27/21
Lot Number	Quantity	Unique Serial #	
KBL2L00	2		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 01/27/21 01S38163001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 01/27/21 01S38163001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019873**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)</b>			Reference Number: <u>01I42029</u>
NDC: 00006-3080-01			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>01/28/21</u>
T031438	1		

**(TH) Transaction History**

Manufacturer's Name: **MERCK SHARP & DOHME**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/27/21</b> <b>PO#01211698</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/28/21</b> <b>RC#016747</b>
<b>SOLD TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Purchased & Ref : <b>01/28/21</b> <b>01S36759004</b>	<b>SHIPPED TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Received & Ref : <b>01/28/21</b> <b>01S36759004</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019873**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)**

NDC: 00006-3080-01

Reference Number: 01I42030

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
T031410	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 01/28/21 01S35318004	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 01/28/21 01S35318004
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142110

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
682E	6	
8L3M	9	
FU5E	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/28/21 01S37835001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/28/21 01S37835001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142110

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
GH3U	6	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 01/28/21 01S37835001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 01/28/21 01S37835001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019879**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01142205

Document Type: Invoice

Reference Date: 02/01/21

Lot Number	Quantity	Unique Serial #
20JG278	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/01/21 01S38349001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/01/21 01S38349001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01142205

Document Type: Invoice

Reference Date: 02/01/21

Lot Number	Quantity	Unique Serial #
T015806	3	
T015805	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/01/21 01S38349001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/01/21 01S38349001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020272**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
SPIRIVA RESPIMAT-2.5MCG,

NDC: 00597-0100-61

Reference Number: 01142785

Document Type: Invoice

Reference Date: 02/11/21

Lot Number	Quantity	Unique Serial #
002623B	1	
002623E	1	
907277C	1	

**(TH) Transaction History**Manufacturer's Name: BOEHRINGER INGELHEIM  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/09/21 PO#01211886

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/10/21 RC#017021

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/11/21 01S39020002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 02/11/21 01S39020002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020272**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
SPIRIVA RESPIMAT-2.5MCG,

NDC: 00597-0100-61

Reference Number: 01142785

Document Type: Invoice

Reference Date: 02/11/21

Lot Number	Quantity	Unique Serial #
907640A	2	
907640B	1	

**(TH) Transaction History**Manufacturer's Name: BOEHRINGER INGELHEIM  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/09/21 PO#01211886

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/10/21 RC#017021

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/11/21 01S39020002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 02/11/21 01S39020002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020237**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:  
**FARXIGA 5MG TAB 30CT,**  
**DAPAGLIFLOZIN**  
**NDC: 00310-6205-30**

Reference Number: 01I42785Document Type: InvoiceReference Date: 02/11/21

Lot Number	Quantity	Unique Serial #
MH0042	1	

**(TH) Transaction History**

Manufacturer's Name: **ASTRAZENECA**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/09/21</b> <b>PO#01211886</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/10/21</b> <b>RC#017019</b>
<b>SOLD TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Purchased & Ref : <b>02/11/21</b> <b>01S39020002</b>	<b>SHIPPED TO:</b> Name: <b>MEADOW DRUGS AND SURGICALS</b> Address: <b>353 NEWBRIDGE RD</b> <b>EAST MEADOW NY 11554</b> Date Received & Ref : <b>02/11/21</b> <b>01S39020002</b>
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020365**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
EDARBI-TAB-80MG-30CT,

NDC: 60631-0080-30

Lot Number	Quantity	Unique Serial #
65834	2	

Reference Number: 01142845

Document Type: Invoice

Reference Date: 02/11/21

**(TH) Transaction History**Manufacturer's Name: ARBOR PHARMACEUTICALS  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211907

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/11/21 RC#017065

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/11/21 01S39020003

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 02/11/21 01S39020003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020402**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
ZENPEP-20,000/63,000/84,000 USP,

NDC: 00023-6112-01

Lot Number	Quantity	Unique Serial #
W03391	1	
W03961	1	

Reference Number: 01I42916

Document Type: Invoice

Reference Date: 02/12/21

**(TH) Transaction History**Manufacturer's Name: NESTLE HEALTHCARE NUTRITION  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/12/21 PO#01211918

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017068

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/12/21 01S39095001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 02/12/21 01S39095001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020399**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PRADAXA-CAP-75MG-60CT,

NDC: 00597-0355-09

Reference Number: 01I42916

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
905624	2	

**(TH) Transaction History**Manufacturer's Name: BOEHRINGER INGELHEIM  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/12/21 PO#01211918	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017068
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/12/21 01S39095001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/12/21 01S39095001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020396**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
JENTADUETO-TAB-2.5/500MG-60CT,

NDC: 00597-0146-60

Reference Number: 01I42916

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
960411	3	

**(TH) Transaction History**Manufacturer's Name: BOEHRINGER INGELHEIM  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/12/21 PO#01211918

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017068

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/12/21 01S39095001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 02/12/21 01S39095001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020269**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

RESTASIS-SINGLE-.05%-.4ML EA-30CT, .5 mg/mL, EMULSION, 30 VIAL, SINGLE-USE in 1 TRAY (0023-9163-30) &gt; .4 mL in 1

NDC: 00023-9163-30

Reference Number: 01142918

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
10445	1	
T0382	2	

**(TH) Transaction History**

Manufacturer's Name: ALLERGAN

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/09/21 PO#01211886

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/10/21 RC#017021

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/12/21 01S39020005

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 02/12/21 01S39020005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01142924

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
T024073	1	
T030722	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/12/21 01S39153001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/12/21 01S39153001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019872**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01142924

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
T024073	2	
T032791	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/12/21 01S39153001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/12/21 01S39153001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020439**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)

NDC: 00006-3080-01

Reference Number: 01I43003

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
T027924	1	
T031410	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/15/21 01S36759005	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/15/21 01S36759005
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020451**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01143005
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 02/15/21
V59A	1		
XW2J	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/15/21 01S38498002	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/15/21 01S38498002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020443**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Reference Number: 01I43013

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
T017702	1	
T019911	1	
T047702	1	

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/15/21 01S36514003	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/15/21 01S36514003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020458**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01143049

Document Type: Invoice

Reference Date: 02/15/21

Lot Number	Quantity	Unique Serial #
T024073	1	
T024536	2	
T030722	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/15/21 RC#017082
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/15/21 01S39183001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/15/21 01S39183001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020530**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PRADAXA-CAP-75MG-60CT,

NDC: 00597-0355-09

Reference Number: 01I43159

Document Type: Invoice

Reference Date: 02/17/21

Lot Number	Quantity	Unique Serial #
905839	1	

**(TH) Transaction History**Manufacturer's Name: BOEHRINGER INGELHEIM  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/16/21 PO#01211958	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/16/21 RC#017129
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 02/17/21 01S39095002	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 02/17/21 01S39095002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020658**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Lot Number	Quantity	Unique Serial #
T035257	1	

Reference Number: 01I43442

Document Type: Invoice

Reference Date: 02/22/21

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017222

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 02/22/21 01S36514004

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 02/22/21 01S36514004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021015**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

**ISENTRESS 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-3080-01)**

NDC: 00006-3080-01

Reference Number: 01143930

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
T024068	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/01/21 01S38226001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/01/21 01S38226001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021016**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01143951
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/01/21
MW5J	3		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/01/21 01S37967001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/01/21 01S37967001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021296**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)

NDC: 49702-0242-13

Reference Number: 01144419

Document Type: Invoice

Reference Date: 03/08/21

Lot Number	Quantity	Unique Serial #
CT5U	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017536
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/08/21 01S37967002	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/08/21 01S37967002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020678**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144880

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
T036714	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/15/21 01S40730001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/15/21 01S40730001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021014**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144880

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
T036714	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/01/21 PO#01212108	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/01/21 RC#017381
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/15/21 01S40730001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/15/21 01S40730001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021294**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01144880

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
T036714	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017536
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/15/21 01S40730001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/15/21 01S40730001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021664**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)			Reference Number: 01145215
RILPIVIRINE HCL			Document Type: Invoice
NDC: 59676-0278-01			Reference Date: 03/19/21
Lot Number	Quantity	Unique Serial #	
KFL7500	1		
KFL7500A	2		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/19/21 PO#01212358	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/19/21 RC#017722
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/19/21 01S40809001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/19/21 01S40809001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021825**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01145696
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 03/26/21
MW5J	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Purchased & Ref : 03/26/21 01S41347001	<b>SHIPPED TO:</b> Name: MEADOW DRUGS AND SURGICALS Address: 353 NEWBRIDGE RD EAST MEADOW NY 11554 Date Received & Ref : 03/26/21 01S41347001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021828**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
PIFELTRO 100MG TAB 30CT,

NDC:

Lot Number	Quantity	Unique Serial #
T036720	1	

Reference Number: 01I45697

Document Type: Invoice

Reference Date: 03/26/21

**(TH) Transaction History**Manufacturer's Name: MERCK SHARP & DOHME  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/25/21 RC#017833

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Purchased &amp; Ref : 03/26/21 01S38349002

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD  
EAST MEADOW NY 11554

Date Received &amp; Ref : 03/26/21 01S38349002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021836**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01145825

Document Type: Invoice

Reference Date: 03/29/21

Lot Number	Quantity	Unique Serial #
LD3H	1	
LN5D	5	
RN2F	4	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/26/21 RC#017834

**SOLD TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Purchased &amp; Ref : 03/29/21 01S41554001

**SHIPPED TO:**

Name: MEADOW DRUGS AND SURGICALS

Address: 353 NEWBRIDGE RD

EAST MEADOW NY 11554

Date Received &amp; Ref : 03/29/21 01S41554001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43925

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE ROAD #150 NOVI MI 48377 Date Purchased & Ref : 03/01/21 01S39916001	<b>SHIPPED TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE RD #150 NOVI MI 48377 Date Received & Ref : 03/01/21 01S39916001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020680**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43925

Document Type: Invoice

Reference Date: 03/01/21

Lot Number	Quantity	Unique Serial #
20HG204	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE ROAD #150 NOVI MI 48377 Date Purchased & Ref : 03/01/21 01S39916001	<b>SHIPPED TO:</b> Name: KEYSTONE SPECIALTY CARE PHARMACY Address: 46325 W 12 MILE RD #150 NOVI MI 48377 Date Received & Ref : 03/01/21 01S39916001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012771**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: <u>01I26089</u>
NDC: 49702-0242-13			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>05/22/20</u>
U42N	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/22/20 RC#012028
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/22/20 01S24504003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/22/20 01S24504003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012775**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
19AG066X	1	
19EG280	1	
19BG119X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/22/20 RC#012028
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/22/20 01S24504003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/22/20 01S24504003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012775**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
18MG939	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/22/20 RC#012028
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/22/20 01S24504003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/22/20 01S24504003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012772**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
18LG861X	5	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/22/20 RC#012028
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/22/20 01S24504003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/22/20 01S24504003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012773**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
5Y6J	2	
U34X	1	
D97M	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 05/22/20 PO#01208031

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 05/22/20 RC#012028

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 05/22/20 01S24504003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 05/22/20 01S24504003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012773**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
A96V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 05/22/20 PO#01208031

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 05/22/20 RC#012028

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 05/22/20 01S24504003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 05/22/20 01S24504003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012774**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26089

Document Type: Invoice

Reference Date: 05/22/20

Lot Number	Quantity	Unique Serial #
Y89X	1	
BP6T	1	
7F7B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 05/22/20 PO#01208031

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 05/22/20 RC#012028

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 05/22/20 01S24504003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 05/22/20 01S24504003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012774**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01I26089
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 05/22/20
EW6D	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/22/20 PO#01208031	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/22/20 RC#012028
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/22/20 01S24504003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/22/20 01S24504003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012840**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)			Reference Number: 01I26211
RILPIVIRINE HCL			Document Type: Invoice
NDC: 59676-0278-01			Reference Date: 05/27/20
Lot Number	Quantity	Unique Serial #	
ICL1M00	1		
IGL1300	1		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/27/20 PO#01208060	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/27/20 RC#012081
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/27/20 01S24628001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/27/20 01S24628001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012841**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I26211

Document Type: Invoice

Reference Date: 05/27/20

Lot Number	Quantity	Unique Serial #
18LG888	1	
18AG065	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/27/20 PO#01208060	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/27/20 RC#012081
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/27/20 01S24628001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/27/20 01S24628001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012878**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I26283

Document Type: Invoice

Reference Date: 05/28/20

Lot Number	Quantity	Unique Serial #
S007958	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/27/20 PO#01208081	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012110
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/28/20 01S24699001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/28/20 01S24699001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012883**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I26283

Document Type: Invoice

Reference Date: 05/28/20

Lot Number	Quantity	Unique Serial #
S008147	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/28/20 PO#01208104	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/28/20 01S24699001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/28/20 01S24699001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012885**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I26283

Document Type: Invoice

Reference Date: 05/28/20

Lot Number	Quantity	Unique Serial #
19JG470	1	
19CG208	1	
19AG066X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/28/20 PO#01208104	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/28/20 01S24699001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/28/20 01S24699001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012885**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I26283

Document Type: Invoice

Reference Date: 05/28/20

Lot Number	Quantity	Unique Serial #
19EG2841	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/28/20 PO#01208104	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 05/28/20 01S24699001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 05/28/20 01S24699001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012886**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
18DG336	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/28/20 PO#01208104	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/02/20 01S24868002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/02/20 01S24868002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012992**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
18GG530	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208165	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012208
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/02/20 01S24868002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/02/20 01S24868002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012979**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
18MG968	1	
19DG241	1	
19EG331	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208158	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012207
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/02/20 01S24868002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/02/20 01S24868002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012993**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
19EG269	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208165	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012208
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/02/20 01S24868002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/02/20 01S24868002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012980**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
19CG184	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208158	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012207
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/02/20 01S24868002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/02/20 01S24868002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26514

Document Type: Invoice

Reference Date: 06/02/20

Lot Number	Quantity	Unique Serial #
8ZP2158	1	
CN8B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/01/20 PO#01208165

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/02/20 RC#012208

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/02/20 01S24868002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/02/20 01S24868002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01I26807

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
IKL3H00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/08/20 01S25163002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/08/20 01S25163002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013118**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
S008130	1	
R035410	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/08/20 01S25163002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/08/20 01S25163002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013119**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)

NDC: 49702-0242-13

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
4F8W	1	
YK9Y	1	
V73Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/08/20 01S25163002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/08/20 01S25163002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013121**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
JP7D	3	
A96V	1	
LK9K	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/05/20 PO#01208268

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/08/20 RC#012330

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/08/20 01S25163002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/08/20 01S25163002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013121**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
E76Y	2	
BY3F	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/05/20 PO#01208268

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/08/20 RC#012330

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/08/20 01S25163002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/08/20 01S25163002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013122**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01126807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
4F9S	1	
GR8J	2	
LB7W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/08/20 01S25163002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/08/20 01S25163002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013122**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
CE7N	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/08/20 01S25163002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/08/20 01S25163002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013085**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26807

Document Type: Invoice

Reference Date: 06/08/20

Lot Number	Quantity	Unique Serial #
SM9N	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/03/20 PO#01208217

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/04/20 RC#012286

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/08/20 01S25163002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/08/20 01S25163002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I26905

Document Type: Invoice

Reference Date: 06/09/20

Lot Number	Quantity	Unique Serial #
IKL3H00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/09/20 01S25237001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/09/20 01S25237001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I26905

Document Type: Invoice

Reference Date: 06/09/20

Lot Number	Quantity	Unique Serial #
19HG421	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208165	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012208
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/09/20 01S25237001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/09/20 01S25237001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26937

Document Type: Invoice

Reference Date: 06/10/20

Lot Number	Quantity	Unique Serial #
ZY7S	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/03/20 PO#01208203

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/04/20 RC#012254

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/10/20 01S25312001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/10/20 01S25312001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013121**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I26937

Document Type: Invoice

Reference Date: 06/10/20

Lot Number	Quantity	Unique Serial #
8N2W	1	
9R2Y	1	
PW4Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/05/20 PO#01208268

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/08/20 RC#012330

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/10/20 01S25312001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/10/20 01S25312001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013122**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26937

Document Type: Invoice

Reference Date: 06/10/20

Lot Number	Quantity	Unique Serial #
FP4T	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/10/20 01S25312001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/10/20 01S25312001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013081**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I26937

Document Type: Invoice

Reference Date: 06/10/20

Lot Number	Quantity	Unique Serial #
N55W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/04/20 PO#01208227

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/04/20 RC#012284

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/10/20 01S25312001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/10/20 01S25312001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013077**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I27187

Document Type: Invoice

Reference Date: 06/15/20

Lot Number	Quantity	Unique Serial #
IGL1300	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/04/20 PO#01208227	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/04/20 RC#012283
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/15/20 01S25484001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/15/20 01S25484001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013122**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01127187
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 06/15/20
N55W	1		
433G	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/15/20 01S25484001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/15/20 01S25484001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013335**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01127188

Document Type: Invoice

Reference Date: 06/15/20

Lot Number	Quantity	Unique Serial #
BF7T	1	
X89X	1	
VU3A	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/11/20 PO#01208371	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/15/20 RC#012487
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/15/20 01S25484002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/15/20 01S25484002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013335**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01127188

Document Type: Invoice

Reference Date: 06/15/20

Lot Number	Quantity	Unique Serial #
7F7B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 06/11/20 PO#01208371

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 06/15/20 RC#012487

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 06/15/20 01S25484002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 06/15/20 01S25484002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013115**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01I27314

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
IKL3H00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013118**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I27314

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
S000158	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012992**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I27314

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
19DG222	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208165	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012208
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013125**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I27314

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
19HG416	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/05/20 PO#01208268	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/08/20 RC#012330
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012993**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I27314

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
19JG484	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208165	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012208
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012980**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I27314

Document Type: Invoice

Reference Date: 06/17/20

Lot Number	Quantity	Unique Serial #
19JG484	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/01/20 PO#01208158	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/02/20 RC#012207
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/17/20 01S25652001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/17/20 01S25652001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013342**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27475

Document Type: Invoice

Reference Date: 06/19/20

Lot Number	Quantity	Unique Serial #
19EG280	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/15/20 PO#01208419	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/15/20 RC#012489
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/19/20 01S25749001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/19/20 01S25749001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013077**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)			Reference Number: 01I27560
RILPIVIRINE HCL			Document Type: Invoice
NDC: 59676-0278-01			Reference Date: 06/22/20
Lot Number	Quantity	Unique Serial #	
IIL7200A	1		

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/04/20 PO#01208227	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/04/20 RC#012283
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/22/20 01S25818001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/22/20 01S25818001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013342**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27560

Document Type: Invoice

Reference Date: 06/22/20

Lot Number	Quantity	Unique Serial #
19CG202	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/15/20 PO#01208419	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/15/20 RC#012489
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/22/20 01S25818001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/22/20 01S25818001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013264**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27560

Document Type: Invoice

Reference Date: 06/22/20

Lot Number	Quantity	Unique Serial #
19CG202	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/10/20 PO#01208348	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/11/20 RC#012434
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/22/20 01S25818001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/22/20 01S25818001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013595**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27796

Document Type: Invoice

Reference Date: 06/24/20

Lot Number	Quantity	Unique Serial #
19CG202	1	
19BG119X	1	
19CG205	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/24/20 01S26072001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/24/20 01S26072001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013264**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27796

Document Type: Invoice

Reference Date: 06/24/20

Lot Number	Quantity	Unique Serial #
19EG281	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/10/20 PO#01208348	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/11/20 RC#012434
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/24/20 01S26072001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/24/20 01S26072001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013596**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I27796

Document Type: Invoice

Reference Date: 06/24/20

Lot Number	Quantity	Unique Serial #
18EG432	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/24/20 01S26072001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/24/20 01S26072001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013550**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I27796

Document Type: Invoice

Reference Date: 06/24/20

Lot Number	Quantity	Unique Serial #
18MG965	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/18/20 PO#01208479	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/22/20 RC#012626
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/24/20 01S26072001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/24/20 01S26072001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013734**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I27944

Document Type: Invoice

Reference Date: 06/26/20

Lot Number	Quantity	Unique Serial #
18LG905	1	
19CG202	1	
19AG066X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/26/20 PO#01208593	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/26/20 RC#012722
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/26/20 01S26208001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/26/20 01S26208001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013734**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I28073

Document Type: Invoice

Reference Date: 06/29/20

Lot Number	Quantity	Unique Serial #
19CG210	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/26/20 PO#01208593	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/26/20 RC#012722
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/29/20 01S26286001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/29/20 01S26286001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013264**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I28073

Document Type: Invoice

Reference Date: 06/29/20

Lot Number	Quantity	Unique Serial #
19JG470	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/10/20 PO#01208348	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/11/20 RC#012434
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/29/20 01S26286001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/29/20 01S26286001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013595**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I28073

Document Type: Invoice

Reference Date: 06/29/20

Lot Number	Quantity	Unique Serial #
19EG326	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/29/20 01S26286001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/29/20 01S26286001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013597**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I28073

Document Type: Invoice

Reference Date: 06/29/20

Lot Number	Quantity	Unique Serial #
19BG125	1	
18MG968	1	
IKL2L00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 06/29/20 01S26286001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 06/29/20 01S26286001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000012882**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I28214

Document Type: Invoice

Reference Date: 07/02/20

Lot Number	Quantity	Unique Serial #
IIL7100	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 05/28/20 PO#01208104	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 05/28/20 RC#012109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/02/20 01S26448001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/02/20 01S26448001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013869**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I28214

Document Type: Invoice

Reference Date: 07/02/20

Lot Number	Quantity	Unique Serial #
JE6K	1	
JE6R	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/30/20 PO#01208658	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/02/20 RC#012811
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/02/20 01S26448001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/02/20 01S26448001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013874**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**SELZENTRY TB 300MG 60/BT,**

NDC: 49702-0224-18

Lot Number	Quantity	Unique Serial #
W60049	1	

Reference Number: 01I28214Document Type: InvoiceReference Date: 07/02/20**(TH) Transaction History**Manufacturer's Name: **VIIV HEALTHCARE**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **06/30/20 PO#01208658****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **07/02/20 RC#012811****SOLD TO:**Name: **GRUBB'S SOUTHEAST PHARMACY**Address: **1800 MARTIN LUTHER KING JR AVE SE****WASHINGTON DC 20020**Date Purchased & Ref : **07/02/20 01S26448001****SHIPPED TO:**Name: **GRUBB'S SOUTHEAST PHARMACY**Address: **1800 MARTIN LUTHER KING JR. AVE SE****WASHINGTON DC 20020**Date Received & Ref : **07/02/20 01S26448001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014516**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I30259

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
19AG058	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 07/24/20 PO#01209002	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/27/20 RC#013247
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/31/20 01S28126001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/31/20 01S28126001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013596**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I30259

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
19DG222	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/31/20 01S28126001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/31/20 01S28126001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014686**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
6E4C	1	
LR8B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/30/20 PO#01209091

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/31/20 RC#013363

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 07/31/20 01S28126002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 07/31/20 01S28126002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014683**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01I30260
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 07/31/20
VT2R	1		
8C9L	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 07/30/20 PO#01209091	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/31/20 RC#013363
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/31/20 01S28126002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/31/20 01S28126002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
X49H	1	
A96V	1	
759H	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/30/20 PO#01209091

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/31/20 RC#013363

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 07/31/20 01S28126002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 07/31/20 01S28126002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
E76Y	1	
686H	1	
TS4P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/30/20 PO#01209091

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/31/20 RC#013363

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 07/31/20 01S28126002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 07/31/20 01S28126002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
HC6L	1	
DR8L	1	
W24V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/30/20 PO#01209091

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/31/20 RC#013363

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 07/31/20 01S28126002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 07/31/20 01S28126002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
XB9B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 07/30/20 PO#01209091

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 07/31/20 RC#013363

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 07/31/20 01S28126002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 07/31/20 01S28126002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014691**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I30260

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
18LG861X	2	
18HG617X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 07/30/20 PO#01209091	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/31/20 RC#013366
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 07/31/20 01S28126002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 07/31/20 01S28126002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000013592**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I30529

Document Type: Invoice

Reference Date: 08/06/20

Lot Number	Quantity	Unique Serial #
IKL3H00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 06/23/20 PO#01208526	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 06/23/20 RC#012649
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 08/06/20 01S26334001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 08/06/20 01S26334001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015549**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
19CG202	1	
19EG281	2	
19CG208	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 08/27/20 PO#01209513	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 08/28/20 RC#013893
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 08/28/20 01S29683001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 08/28/20 01S29683001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015549**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
19MG718	1	
19GG404	1	
19BG119X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 08/27/20 PO#01209513	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 08/28/20 RC#013893
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 08/28/20 01S29683001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 08/28/20 01S29683001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015549**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
19JG470	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 08/27/20 PO#01209513	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 08/28/20 RC#013893
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 08/28/20 01S29683001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 08/28/20 01S29683001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015556**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
8ZP1961	1	
WF2G	1	
E76Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

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Date Purchased &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
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- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015556**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
8ZP1457	1	
885T	2	
WX8M	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

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Date Received &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015556**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
PW4Y	1	
652K	2	
TS4P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

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**SHIPPED TO:**

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Name:

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Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (F) did not knowingly provide false transaction information; and
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SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015556**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
X49H	1	
WS3J	1	
CJ4V	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

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Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

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Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015556**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
W24V	1	
689W	1	
HC6L	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

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Date Received &amp; Ref :

**SOLD TO:**

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Date Purchased &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

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- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015557**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
PL3D	3	
NB8J	3	
L53T	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 08/27/20 PO#01209513	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 08/28/20 RC#013894
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 08/28/20 01S29683001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 08/28/20 01S29683001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015557**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
EW6D	8	
X46V	2	
2G7U	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

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Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015557**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01I32039

Document Type: Invoice

Reference Date: 08/28/20

Lot Number	Quantity	Unique Serial #
WK7W	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 08/27/20 PO#01209513

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 08/28/20 RC#013894

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 08/28/20 01S29683001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 08/28/20 01S29683001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

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Date Received &amp; Ref :

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Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015625**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I32251

Document Type: Invoice

Reference Date: 09/01/20

Lot Number	Quantity	Unique Serial #
19CG210	1	
19EG326	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 08/28/20 PO#01209544	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/01/20 RC#013924
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/01/20 01S29683002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/01/20 01S29683002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015759**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I32518

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
19GG352	3	
19JG484	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/02/20 PO#01209608	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/08/20 RC#014052
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/08/20 01S30055001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/08/20 01S30055001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015760**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32518

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
E76Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/02/20 PO#01209608

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/08/20 RC#014052

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/08/20 01S30055001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/08/20 01S30055001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015759**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I32538

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
18LG861X	1	
19DG231	4	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/02/20 PO#01209608

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/08/20 RC#014052

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/08/20 01S29683003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/08/20 01S29683003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015760**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I32538

Document Type: Invoice

Reference Date: 09/08/20

Lot Number	Quantity	Unique Serial #
8ZP1457	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/02/20 PO#01209608

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/08/20 RC#014052

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/08/20 01S29683003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/08/20 01S29683003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015904**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33044

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
SH7B	1	
689W	1	
TS4P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/15/20 PO#01209744

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/15/20 RC#014148

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/15/20 01S30561004

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/15/20 01S30561004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015904**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33044

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
885T	2	
652K	3	
X49H	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/15/20 PO#01209744	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/15/20 RC#014148
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/15/20 01S30561004	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/15/20 01S30561004
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015904**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33044

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
X49P	1	
CJ4V	1	
PC5C	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/15/20 PO#01209744

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/15/20 RC#014148

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/15/20 01S30561004

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/15/20 01S30561004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015904**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33044

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
8N2Y	1	
HC3V	1	
8ZP1457	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/15/20 PO#01209744

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/15/20 RC#014148

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/15/20 01S30561004

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/15/20 01S30561004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015903**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I33079

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
20EG062	2	
20GG129	5	
20AG853X	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/15/20 PO#01209744	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/15/20 RC#014148
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/15/20 01S30561002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/15/20 01S30561002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015903**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I33079

Document Type: Invoice

Reference Date: 09/15/20

Lot Number	Quantity	Unique Serial #
20GG131	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/15/20 PO#01209744	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/15/20 RC#014148
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/15/20 01S30561002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/15/20 01S30561002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)</b>			Reference Number: <b>01I33553</b>
RILPIVIRINE HCL			Document Type: <b>Invoice</b>
NDC: 59676-0278-01			Reference Date: <b>09/22/20</b>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	
IIL7200	1		
IIL7200B	1		

**(TH) Transaction History**

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>08/28/20</b> <b>PO#01209544</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>09/01/20</b> <b>RC#013924</b>
<b>SOLD TO:</b> Name: <b>GRUBB'S SOUTHEAST PHARMACY</b> Address: <b>1800 MARTIN LUTHER KING JR AVE SE</b> <b>WASHINGTON DC 20020</b> Date Purchased & Ref : <b>09/22/20</b> <b>01S31026001</b>	<b>SHIPPED TO:</b> Name: <b>GRUBB'S SOUTHEAST PHARMACY</b> Address: <b>1800 MARTIN LUTHER KING JR. AVE SE</b> <b>WASHINGTON DC 20020</b> Date Received & Ref : <b>09/22/20</b> <b>01S31026001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000015944**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I33553

Document Type: Invoice

Reference Date: 09/22/20

Lot Number	Quantity	Unique Serial #
20GG117	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/10/20 PO#01209692	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/16/20 RC#014176
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/22/20 01S31026001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/22/20 01S31026001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016155**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I33579

Document Type: Invoice

Reference Date: 09/22/20

Lot Number	Quantity	Unique Serial #
FL5F	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/21/20 PO#01209825

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/22/20 RC#014294

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/22/20 01S31026002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/22/20 01S31026002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016154**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01I33579
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 09/22/20
FN4D	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/21/20 PO#01209825	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/22/20 RC#014294
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/22/20 01S31026002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/22/20 01S31026002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016149**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33579

Document Type: Invoice

Reference Date: 09/22/20

Lot Number	Quantity	Unique Serial #
689W	9	
RW9Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/21/20 PO#01209825

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/22/20 RC#014294

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/22/20 01S31026002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/22/20 01S31026002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016150**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01133579

Document Type: Invoice

Reference Date: 09/22/20

Lot Number	Quantity	Unique Serial #
PG9F	3	
VH3K	2	
XV9Y	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/21/20 PO#01209825	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/22/20 RC#014294
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/22/20 01S31026002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/22/20 01S31026002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016150**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01133579

Document Type: Invoice

Reference Date: 09/22/20

Lot Number	Quantity	Unique Serial #
V59A	2	
XW2J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/21/20 PO#01209825	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/22/20 RC#014294
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/22/20 01S31026002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/22/20 01S31026002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I33991

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
6E4B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/28/20 PO#01209895

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/28/20 RC#014370

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/28/20 01S31272002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/28/20 01S31272002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016149**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33991

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
8N2W	2	
HN9W	1	
XB9B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/21/20 PO#01209825

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/22/20 RC#014294

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/28/20 01S31272002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/28/20 01S31272002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016149**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33991

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
WP4P	1	
RJ9G	2	
8N2Y	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 09/21/20 PO#01209825	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 09/22/20 RC#014294
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 09/28/20 01S31272002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 09/28/20 01S31272002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016149**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I33991

Document Type: Invoice

Reference Date: 09/28/20

Lot Number	Quantity	Unique Serial #
7J4V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/21/20 PO#01209825

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/22/20 RC#014294

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 09/28/20 01S31272002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 09/28/20 01S31272002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016285**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I34817

Document Type: Invoice

Reference Date: 10/09/20

Lot Number	Quantity	Unique Serial #
19AG058	1	
18LG888	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 09/28/20 PO#01209895

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 09/28/20 RC#014371

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/09/20 01S32107001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/09/20 01S32107001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016830**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01135475
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 10/19/20
B52W	1		
784F	5		
526T	4		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/16/20 PO#01210198	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/19/20 RC#014757
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/19/20 01S32107004	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/19/20 01S32107004
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016822**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I35542

Document Type: Invoice

Reference Date: 10/20/20

Lot Number	Quantity	Unique Serial #
20GG131	2	
20EG062	3	
19MG727X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/16/20 PO#01210201	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/19/20 RC#014755
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/20/20 01S32693001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/20/20 01S32693001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I35864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
689Y	1	
885M	1	
885T	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 10/22/20 PO#01210304

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 10/23/20 RC#014888

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/23/20 01S32912001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/23/20 01S32912001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I35864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
CJ4V	1	
GB2B	1	
GB2K	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 10/22/20 PO#01210304

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 10/23/20 RC#014888

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/23/20 01S32912001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/23/20 01S32912001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I35864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
LK9K	1	
RW9Y	1	
WS3J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 10/22/20 PO#01210304

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 10/23/20 RC#014888

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/23/20 01S32912001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/23/20 01S32912001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016991**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I35864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
WX8M	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014888
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/23/20 01S32912001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/23/20 01S32912001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016989**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01135864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
526T	4	
784F	2	
EK5N	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014885
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/23/20 01S32912001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/23/20 01S32912001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016989**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01135864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
J25S	2	
LX8Y	4	
YK3E	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 10/22/20 PO#01210304

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 10/23/20 RC#014885

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/23/20 01S32912001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/23/20 01S32912001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016989**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01135864

Document Type: Invoice

Reference Date: 10/23/20

Lot Number	Quantity	Unique Serial #
YR8X	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014885
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/23/20 01S32912001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/23/20 01S32912001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017079**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I36358

Document Type: Invoice

Reference Date: 10/30/20

Lot Number	Quantity	Unique Serial #
S017036	1	
T013564	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210379	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014961
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/30/20 01S33398001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/30/20 01S33398001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016990**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I36358

Document Type: Invoice

Reference Date: 10/30/20

Lot Number	Quantity	Unique Serial #
20EG106	3	
20GG117	4	
20HG193	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014885
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/30/20 01S33398001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/30/20 01S33398001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000016990**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I36358

Document Type: Invoice

Reference Date: 10/30/20

Lot Number	Quantity	Unique Serial #
20HG205	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/22/20 PO#01210304	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/23/20 RC#014885
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/30/20 01S33398001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/30/20 01S33398001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017098**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I36358

Document Type: Invoice

Reference Date: 10/30/20

Lot Number	Quantity	Unique Serial #
18AG056	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210378	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014972
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 10/30/20 01S33398001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 10/30/20 01S33398001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017096**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I36358

Document Type: Invoice

Reference Date: 10/30/20

Lot Number	Quantity	Unique Serial #
19MG726	4	
19JG484	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 10/28/20 PO#01210378

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 10/29/20 RC#014972

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 10/30/20 01S33398001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 10/30/20 01S33398001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017214**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I36717

Document Type: Invoice

Reference Date: 11/05/20

Lot Number	Quantity	Unique Serial #
LR7X	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/04/20 PO#01210470

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/05/20 RC#015085

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/05/20 01S31272005

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/05/20 01S31272005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017213**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)

NDC: 49702-0242-13

Reference Number: 01I36717

Document Type: Invoice

Reference Date: 11/05/20

Lot Number	Quantity	Unique Serial #
FN4D	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/04/20 PO#01210470	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/05/20 RC#015085
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/05/20 01S31272005	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/05/20 01S31272005
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017093**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I36833

Document Type: Invoice

Reference Date: 11/06/20

Lot Number	Quantity	Unique Serial #
HC6L	2	
PC5C	1	
VN7P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210379	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014968
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/06/20 01S32912002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/06/20 01S32912002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017345**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I36922

Document Type: Invoice

Reference Date: 11/09/20

Lot Number	Quantity	Unique Serial #
19LG637	1	
19NG781	1	
20CG954	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/09/20 01S33764003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/09/20 01S33764003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017097**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I37159

Document Type: Invoice

Reference Date: 11/12/20

Lot Number	Quantity	Unique Serial #
IIL7100	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 10/28/20 PO#01210378	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 10/29/20 RC#014972
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/12/20 01S34059001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/12/20 01S34059001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137493

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
652K	2	
689W	1	
8ZP1862	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/13/20 PO#01210630

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/16/20 RC#015302

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/16/20 01S33764005

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/16/20 01S33764005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137493

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
DR8N	1	
EM3E	1	
HC3V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/16/20 01S33764005	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/16/20 01S33764005
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137493

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
K62J	1	
PC5C	1	
TS4P	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/13/20 PO#01210630

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/16/20 RC#015302

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/16/20 01S33764005

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/16/20 01S33764005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137493

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
VN7P	1	
WS3J	1	
X49H	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/13/20 PO#01210630

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/16/20 RC#015302

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/16/20 01S33764005

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/16/20 01S33764005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137493

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
CJ4V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/13/20 PO#01210630

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/16/20 RC#015302

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/16/20 01S33764005

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/16/20 01S33764005

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017538**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I37644

Document Type: Invoice

Reference Date: 11/18/20

Lot Number	Quantity	Unique Serial #
S008129	1	
S006926	1	
S021930	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015306
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/18/20 01S34433001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/18/20 01S34433001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017526**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I37644

Document Type: Invoice

Reference Date: 11/18/20

Lot Number	Quantity	Unique Serial #
20GG117	1	
19MG718	3	
19MG715	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/18/20 01S34433001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/18/20 01S34433001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017526**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I37644

Document Type: Invoice

Reference Date: 11/18/20

Lot Number	Quantity	Unique Serial #
20DG048	2	
20AG852	1	
19LG594	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/18/20 01S34433001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/18/20 01S34433001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017526**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I37644

Document Type: Invoice

Reference Date: 11/18/20

Lot Number	Quantity	Unique Serial #
19LG609	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015302
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/18/20 01S34433001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/18/20 01S34433001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017535**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01I37644

Document Type: Invoice

Reference Date: 11/18/20

Lot Number	Quantity	Unique Serial #
19NG777	1	
20EG087	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015306
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 11/18/20 01S34433001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 11/18/20 01S34433001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017841**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01138183

Document Type: Invoice

Reference Date: 11/25/20

Lot Number	Quantity	Unique Serial #
689Y	3	
GB2K	1	
GB2B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/24/20 PO#01210770

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/25/20 RC#015460

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 11/25/20 01S34433003

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 11/25/20 01S34433003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017539**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I38366

Document Type: Invoice

Reference Date: 12/01/20

Lot Number	Quantity	Unique Serial #
IKL3I00	1	
IKL3H00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/13/20 PO#01210630	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/16/20 RC#015306
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/01/20 01S35037001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/01/20 01S35037001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017687**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I38366

Document Type: Invoice

Reference Date: 12/01/20

Lot Number	Quantity	Unique Serial #
19MG718	2	
19NG782	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/19/20 PO#01210702	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/20/20 RC#015400
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/01/20 01S35037001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/01/20 01S35037001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017684**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-</b>			Reference Number: <u>01I38366</u>
NDC: 59676-0562-01			Document Type: <u>Invoice</u>
<b>Lot Number</b>	<b>Quantity</b>	<b>Unique Serial #</b>	Reference Date: <u>12/01/20</u>
20JG257	1		

**(TH) Transaction History**

Manufacturer's Name: **JANSSEN PRODUCTS**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>11/19/20</b> <b>PO#01210702</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>11/20/20</b> <b>RC#015400</b>
<b>SOLD TO:</b> Name: <b>GRUBB'S SOUTHEAST PHARMACY</b> Address: <b>1800 MARTIN LUTHER KING JR AVE SE</b> <b>WASHINGTON DC 20020</b> Date Purchased & Ref : <b>12/01/20</b> <b>01S35037001</b>	<b>SHIPPED TO:</b> Name: <b>GRUBB'S SOUTHEAST PHARMACY</b> Address: <b>1800 MARTIN LUTHER KING JR. AVE SE</b> <b>WASHINGTON DC 20020</b> Date Received & Ref : <b>12/01/20</b> <b>01S35037001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017842**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01138366
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/01/20
7N9J	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/24/20 PO#01210770	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/25/20 RC#015460
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/01/20 01S35037001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/01/20 01S35037001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018001**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01138509

Document Type: Invoice

Reference Date: 12/03/20

Lot Number	Quantity	Unique Serial #
19GG367X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015588
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/03/20 01S35040001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/03/20 01S35040001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018006**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01138509

Document Type: Invoice

Reference Date: 12/03/20

Lot Number	Quantity	Unique Serial #
19JG484	2	
19MG726	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015589
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/03/20 01S35040001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/03/20 01S35040001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018008**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01138509
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/03/20
VB2Y	1		
WK7W	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015589
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/03/20 01S35040001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/03/20 01S35040001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018002**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I38805

Document Type: Invoice

Reference Date: 12/07/20

Lot Number	Quantity	Unique Serial #
20CG954	1	
19NG781	1	
20DG026	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015588
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/07/20 01S35435001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/07/20 01S35435001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018279**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39033

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
686H	2	
9J3C	3	
BY3F	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015741
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/09/20 01S35040002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/09/20 01S35040002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018279**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39033

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
CG8M	1	
DR8N	1	
E76Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/07/20 PO#01210948

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/09/20 RC#015741

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/09/20 01S35040002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/09/20 01S35040002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018279**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39033

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
FM9R	1	
RA5C	1	
RJ9G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/07/20 PO#01210948

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/09/20 RC#015741

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/09/20 01S35040002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/09/20 01S35040002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018279**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39033

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
SH7B	1	
U34X	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015741
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/09/20 01S35040002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/09/20 01S35040002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018289**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)			Reference Number: 01I39044
NDC: 49702-0242-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/09/20
CT5U	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015745
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/09/20 01S32693002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/09/20 01S32693002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01I39488

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
JFL0U00	1	
JDL8000	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/15/20 01S35900001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/15/20 01S35900001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39603

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
SH7B	1	
WX8M	1	
HC6L	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/16/20 01S35435002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/16/20 01S35435002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39603

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
VN7P	5	
TS4P	1	
X49H	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/16/20 01S35435002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/16/20 01S35435002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39603

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
X49P	2	
652K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/16/20 01S35435002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/16/20 01S35435002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018489**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I39610

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
IGL1300	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015909
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/16/20 01S35900002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/16/20 01S35900002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39610

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
SY7L	1	
T96C	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015906
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/16/20 01S35900002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/16/20 01S35900002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139610

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
526T	2	
784F	1	
7L4D	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/16/20 01S35900002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/16/20 01S35900002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139610

Document Type: Invoice

Reference Date: 12/16/20

Lot Number	Quantity	Unique Serial #
AJ8W	1	
J25S	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015911

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/16/20 01S35900002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/16/20 01S35900002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018789**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01140164

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
20HG204	6	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016109
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/28/20 01S36210001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/28/20 01S36210001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018797**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01140213

Document Type: Invoice

Reference Date: 12/29/20

Lot Number	Quantity	Unique Serial #
JCL8900	1	
JCL8C00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016115
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/29/20 01S36505001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/29/20 01S36505001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018801**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01140213

Document Type: Invoice

Reference Date: 12/29/20

Lot Number	Quantity	Unique Serial #
19NG777	1	
19KG576	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016115
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/29/20 01S36505001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/29/20 01S36505001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140213

Document Type: Invoice

Reference Date: 12/29/20

Lot Number	Quantity	Unique Serial #
7N9J	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 12/29/20 01S36505001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 12/29/20 01S36505001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018791**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140213

Document Type: Invoice

Reference Date: 12/29/20

Lot Number	Quantity	Unique Serial #
2T4G	1	
354K	3	
7N9K	9	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/23/20 PO#01211221

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/28/20 RC#016109

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 12/29/20 01S36505001

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 12/29/20 01S36505001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018795**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

EDURANT 25MG TAB 30CT, 25 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-278-01)

RILPIVIRINE HCL

NDC: 59676-0278-01

Reference Number: 01I40481

Document Type: Invoice

Reference Date: 01/05/21

Lot Number	Quantity	Unique Serial #
JBL5I00	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016115
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/05/21 01S36794001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/05/21 01S36794001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018797**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01140481

Document Type: Invoice

Reference Date: 01/05/21

Lot Number	Quantity	Unique Serial #
JDL7T00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016115
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/05/21 01S36794001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/05/21 01S36794001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

Reference Number: 01140481

NDC: 59676-0571-01

Document Type: Invoice

Reference Date: 01/05/21

Lot Number	Quantity	Unique Serial #
JFL0U00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/05/21 01S36794001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/05/21 01S36794001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I40724

Document Type: Invoice

Reference Date: 01/07/21

Lot Number	Quantity	Unique Serial #
20DG048	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/07/21 01S36992001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/07/21 01S36992001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019595**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I41553

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
KAL2D03	1	
JKL2I00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/21/21 01S37816001	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/21/21 01S37816001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019603**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I41583

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
20KG322	6	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/21/21 01S36987002	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/21/21 01S36987002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42004

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
20HG204	3	
20KG322	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/28/21 01S37816003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/28/21 01S37816003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142098

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
AP7Y	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 01/28/21 01S37816004

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 01/28/21 01S37816004

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01142098
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 01/28/21
2T4G	5		
354K	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016763
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 01/28/21 01S37816004	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 01/28/21 01S37816004
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020445**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01142956

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
20EG087	1	
20JG257	1	
20LG401	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 02/12/21 01S37816005	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 02/12/21 01S37816005
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020620**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I43362

Document Type: Invoice

Reference Date: 02/19/21

Lot Number	Quantity	Unique Serial #
7J4V	1	
RT6K	1	
2Y7S	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/19/21 PO#01212031

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/19/21 RC#017202

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 02/19/21 01S38584002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 02/19/21 01S38584002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020620**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I43362

Document Type: Invoice

Reference Date: 02/19/21

Lot Number	Quantity	Unique Serial #
W36L	1	
LK9U	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/19/21 PO#01212031

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/19/21 RC#017202

**SOLD TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR AVE SE

WASHINGTON DC 20020

Date Purchased &amp; Ref : 02/19/21 01S38584002

**SHIPPED TO:**

Name: GRUBB'S SOUTHEAST PHARMACY

Address: 1800 MARTIN LUTHER KING JR. AVE SE

WASHINGTON DC 20020

Date Received &amp; Ref : 02/19/21 01S38584002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020679**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

JULUCA TAB 30CT, 50; 25 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-242-13)

NDC: 49702-0242-13

Reference Number: 01143497

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
A65T	2	
R49Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/23/21 RC#017225
<b>SOLD TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR AVE SE WASHINGTON DC 20020 Date Purchased & Ref : 02/23/21 01S36835003	<b>SHIPPED TO:</b> Name: GRUBB'S SOUTHEAST PHARMACY Address: 1800 MARTIN LUTHER KING JR. AVE SE WASHINGTON DC 20020 Date Received & Ref : 02/23/21 01S36835003
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017994**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01I39422

Document Type: Invoice

Reference Date: 12/14/20

Lot Number	Quantity	Unique Serial #
JDL7T00	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/01/20 PO#01210838	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/02/20 RC#015587
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 12/14/20 01S35899001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 12/14/20 01S35899001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018451**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZISTA 800MG TAB 30CT,**

NDC: 59676-0566-30

Reference Number: 01I39520Document Type: InvoiceReference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
19EG331	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/14/20</b> <b>PO#01211088</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/14/20</b> <b>RC#015864</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>12/15/20</b> <b>01S35851001</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>12/15/20</b> <b>01S35851001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018451**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZISTA 800MG TAB 30CT,**

NDC: 59676-0566-30

Reference Number: 01I39522Document Type: InvoiceReference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
19EG331	2	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/14/20</b> <b>PO#01211088</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/14/20</b> <b>RC#015864</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>12/15/20</b> <b>01S35899002</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>12/15/20</b> <b>01S35899002</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01139574
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 12/15/20
EK5N	1		
J25S	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 12/15/20 01S35914001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 12/15/20 01S35914001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39574

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
T96C	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015906
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 12/15/20 01S35914001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 12/15/20 01S35914001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139734

Document Type: Invoice

Reference Date: 12/17/20

Lot Number	Quantity	Unique Serial #
V79D	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 12/17/20 01S36158001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 12/17/20 01S36158001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018835**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I40185Document Type: InvoiceReference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
19BG119X	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>12/28/20</b> <b>PO#01211248</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>12/28/20</b> <b>RC#016145</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>12/28/20</b> <b>01S36497002</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>12/28/20</b> <b>01S36497002</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018495**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01140185

Document Type: Invoice

Reference Date: 12/28/20

Lot Number	Quantity	Unique Serial #
7N9J	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015911
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 12/28/20 01S36497002	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 12/28/20 01S36497002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018479**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I40460

Document Type: Invoice

Reference Date: 01/05/21

Lot Number	Quantity	Unique Serial #
20KG337	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/14/20 PO#01211084	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/15/20 RC#015901
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/05/21 01S36640002	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/05/21 01S36640002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I40575

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
20EG060	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/06/21 01S36843001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/06/21 01S36843001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019049**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I40602

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
19MG727X	1	
20AG853X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/06/21 01S36776001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/06/21 01S36776001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140602

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
GB2K	3	
T96C	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Purchased &amp; Ref : 01/06/21 01S36776001

**SHIPPED TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Received &amp; Ref : 01/06/21 01S36776001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018997**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: S00006-0227-61

Reference Number: 01I40876

Document Type: Invoice

Reference Date: 01/11/21

Lot Number	Quantity	Unique Serial #
R032930	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211292	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/04/21 RC#016245
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/11/21 01S37175001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/11/21 01S37175001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018797**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01140876

Document Type: Invoice

Reference Date: 01/11/21

Lot Number	Quantity	Unique Serial #
KFL0000	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/23/20 PO#01211221	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/28/20 RC#016115
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/11/21 01S37175001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/11/21 01S37175001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41717

Document Type: Invoice

Reference Date: 01/25/21

Lot Number	Quantity	Unique Serial #
20JG278	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/25/21 01S37956001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/25/21 01S37956001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019716**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41788Document Type: InvoiceReference Date: 01/25/21

Lot Number	Quantity	Unique Serial #
19CG205	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/25/21 PO#01211652****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/25/21 RC#016683****SOLD TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Purchased & Ref : **01/25/21 01S37966001****SHIPPED TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Received & Ref : **01/25/21 01S37966001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019879**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I42167

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20CG954	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/29/21 01S38315001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/29/21 01S38315001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019881**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I42167

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
20KG322	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 01/29/21 01S38315001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 01/29/21 01S38315001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019891**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01142167

Document Type: Invoice

Reference Date: 01/29/21

Lot Number	Quantity	Unique Serial #
BV3V	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Purchased &amp; Ref : 01/29/21 01S38315001

**SHIPPED TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Received &amp; Ref : 01/29/21 01S38315001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019930**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I42189Document Type: InvoiceReference Date: 02/01/21

Lot Number	Quantity	Unique Serial #
19CG210	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/29/21</b> <b>PO#01211741</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/29/21</b> <b>RC#016793</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>02/01/21</b> <b>01S38315002</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>02/01/21</b> <b>01S38315002</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019871**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

INTELENCE 200MG TAB 60CT, 200 mg/1, TABLET, 60 TABLET in 1 BOTTLE, PLASTIC (59676-571-01)

NDC: 59676-0571-01

Reference Number: 01142517

Document Type: Invoice

Reference Date: 02/05/21

Lot Number	Quantity	Unique Serial #
KDL0002	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/27/21 PO#01211698	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/28/21 RC#016747
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 02/05/21 01S38729001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 02/05/21 01S38729001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01142925

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
T024073	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 02/12/21 01S39139001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 02/12/21 01S39139001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020385**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I42925Document Type: InvoiceReference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
19EG281	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **02/11/21 PO#01211916****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **02/12/21 RC#017067****SOLD TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Purchased & Ref : **02/12/21 01S39139001****SHIPPED TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Received & Ref : **02/12/21 01S39139001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020449**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I43341

Document Type: Invoice

Reference Date: 02/19/21

Lot Number	Quantity	Unique Serial #
20LG396	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/11/21 PO#01211914	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/12/21 RC#017078
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 02/19/21 01S39445002	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 02/19/21 01S39445002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020660**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I43632

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
JFL2X00A	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 02/24/21 01S39635001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 02/24/21 01S39635001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143632

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
7J4V	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Purchased &amp; Ref : 02/24/21 01S39635001

**SHIPPED TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Received &amp; Ref : 02/24/21 01S39635001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143632

Document Type: Invoice

Reference Date: 02/24/21

Lot Number	Quantity	Unique Serial #
7N9J	1	
7N9K	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/22/21 RC#017222

**SOLD TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Purchased &amp; Ref : 02/24/21 01S39635001

**SHIPPED TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Received &amp; Ref : 02/24/21 01S39635001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020534**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I43996Document Type: InvoiceReference Date: 03/02/21

Lot Number	Quantity	Unique Serial #
19CG208	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>02/16/21</b> <b>PO#01211958</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>02/16/21</b> <b>RC#017129</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>03/02/21</b> <b>01S39940001</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>03/02/21</b> <b>01S39940001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021387**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**WELLBUTRIN XL-TAB-300MG-30CT,**

NDC: 00187-0731-30

Lot Number	Quantity	Unique Serial #
20G069P	1	

Reference Number: 01I44634Document Type: InvoiceReference Date: 03/10/21**(TH) Transaction History**Manufacturer's Name: **VALEANT**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>03/10/21</b> <b>PO#01212253</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>03/10/21</b> <b>RC#017580</b>
<b>SOLD TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Purchased & Ref : <b>03/10/21</b> <b>01S40454001</b>	<b>SHIPPED TO:</b> Name: <b>CHARLIE'S PHARMACY</b> Address: <b>1101 FILLMORE STREET</b> <b>SAN FRANCISCO CA 94115</b> Date Received & Ref : <b>03/10/21</b> <b>01S40454001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021385**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Lot Number	Quantity	Unique Serial #
19EG281	1	

Reference Number: 01I44634Document Type: InvoiceReference Date: 03/10/21**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **03/10/21 PO#01212253****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **03/10/21 RC#017580****SOLD TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Purchased & Ref : **03/10/21 01S40454001****SHIPPED TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Received & Ref : **03/10/21 01S40454001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021382**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: S00006-0227-61

Reference Number: 01I44634

Document Type: Invoice

Reference Date: 03/10/21

Lot Number	Quantity	Unique Serial #
S006926	1	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/10/21 PO#01212253	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/10/21 RC#017580
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/10/21 01S40454001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/10/21 01S40454001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021385**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I44707Document Type: InvoiceReference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
19EG281	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **03/10/21 PO#01212253****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **03/10/21 RC#017580****SOLD TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Purchased & Ref : **03/11/21 01S40603001****SHIPPED TO:**Name: **CHARLIE'S PHARMACY**Address: **1101 FILLMORE STREET****SAN FRANCISCO CA 94115**Date Received & Ref : **03/11/21 01S40603001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021301**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01144707

Document Type: Invoice

Reference Date: 03/11/21

Lot Number	Quantity	Unique Serial #
20LG416	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/11/21 01S40603001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/11/21 01S40603001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021305**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01144821

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
RN2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/15/21 01S40676001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/15/21 01S40676001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019622**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I45276

Document Type: Invoice

Reference Date: 03/19/21

Lot Number	Quantity	Unique Serial #
20LG388	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/19/21 01S41072001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/19/21 01S41072001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021830**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I45599

Document Type: Invoice

Reference Date: 03/25/21

Lot Number	Quantity	Unique Serial #
JFL2X00A	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/25/21 01S41387001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/25/21 01S41387001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021832**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE

NDC: 59676-0800-30

Reference Number: 01I45599

Document Type: Invoice

Reference Date: 03/25/21

Lot Number	Quantity	Unique Serial #
20HG204	2	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/25/21 RC#017833
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/25/21 01S41387001	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/25/21 01S41387001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021837**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01145648

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
RN2K	2	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/25/21 PO#01212452	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/26/21 RC#017834
<b>SOLD TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Purchased & Ref : 03/26/21 01S41387002	<b>SHIPPED TO:</b> Name: CHARLIE'S PHARMACY Address: 1101 FILLMORE STREET SAN FRANCISCO CA 94115 Date Received & Ref : 03/26/21 01S41387002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021971**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
SYMTUZA-TAB-30CT,

NDC: 59676-0800-30

Lot Number	Quantity	Unique Serial #
18NG019X	1	

Reference Number: 01I45937

Document Type: Invoice

Reference Date: 03/30/21

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/30/21 PO#01212495

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/30/21 RC#017929

**SOLD TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Purchased &amp; Ref : 03/30/21 01S41553001

**SHIPPED TO:**

Name: CHARLIE'S PHARMACY

Address: 1101 FILLMORE STREET

SAN FRANCISCO CA 94115

Date Received &amp; Ref : 03/30/21 01S41553001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017531**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137507

Document Type: Invoice

Reference Date: 11/16/20

Lot Number	Quantity	Unique Serial #
GB2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/13/20 PO#01210630

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/16/20 RC#015302

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Purchased &amp; Ref : 11/16/20 01S34092001

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Received &amp; Ref : 11/16/20 01S34092001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018279**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39059

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
689W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/07/20 PO#01210948

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/09/20 RC#015741

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Purchased &amp; Ref : 12/09/20 01S35233001

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Received &amp; Ref : 12/09/20 01S35233001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019050**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01140597

Document Type: Invoice

Reference Date: 01/06/21

Lot Number	Quantity	Unique Serial #
Y22W	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/04/21 PO#01211295

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/05/21 RC#016278

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Purchased &amp; Ref : 01/06/21 01S36888001

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Received &amp; Ref : 01/06/21 01S36888001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019784**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
NUEDEXTA-CAP-20/10MG-60CT,

NDC: 64597-0301-60

Reference Number: 01I41891

Document Type: Invoice

Reference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
19R17	1	

**(TH) Transaction History**Manufacturer's Name: AVANIR PHARMACEUTICALS, LLC  
Manufacturer's information:**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD  
REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/26/21 PO#01211675

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR  
CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/26/21 RC#016711

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET  
ATTICA NY 14011

Date Purchased &amp; Ref : 01/26/21 01S38090002

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET  
ATTICA NY 14011

Date Received &amp; Ref : 01/26/21 01S38090002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020450**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142963

Document Type: Invoice

Reference Date: 02/12/21

Lot Number	Quantity	Unique Serial #
GB2K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/11/21 PO#01211914

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/12/21 RC#017078

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Purchased &amp; Ref : 02/12/21 01S38090003

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Received &amp; Ref : 02/12/21 01S38090003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I43556

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
RW9Y	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Purchased &amp; Ref : 02/23/21 01S39603001

**SHIPPED TO:**

Name: ATTICA PHARMACY INC

Address: 2 MARKET STREET

ATTICA NY 14011

Date Received &amp; Ref : 02/23/21 01S39603001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021819**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

DOVATO TAB 30CT, 50; 300 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-246-13)

NDC: 49702-0246-13

Reference Number: 01I45725

Document Type: Invoice

Reference Date: 03/26/21

Lot Number	Quantity	Unique Serial #
R48R	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/25/21 PO#01212452

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/25/21 RC#017833

**SOLD TO:**

Name: BROOKLYN FAMILY PHARMACY

Address: 355 AVENUE X

BROOKLYN NY 11223

Date Purchased &amp; Ref : 03/26/21 01S41442001

**SHIPPED TO:**

Name: BROOKLYN FAMILY PHARMACY

Address: 355 AVENUE X

BROOKLYN NY 11223

Date Received &amp; Ref : 03/26/21 01S41442001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017344**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0562-01

Reference Number: 01137378

Document Type: Invoice

Reference Date: 11/13/20

Lot Number	Quantity	Unique Serial #
18JG646X	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: SUNRISE PHARMACY Address: 1637 THIRD AVENUE #A CHULA VISTA CA 91911 Date Purchased & Ref : 11/13/20 01S34214001	<b>SHIPPED TO:</b> Name: SUNRISE PHARMACY Address: 1637 THIRD AVENUE #A CHULA VISTA CA 91911 Date Received & Ref : 11/13/20 01S34214001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017339**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: <b>ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)</b>			Reference Number: <u>01I37378</u>
NDC: 00006-0227-61			Document Type: <u>Invoice</u>
Lot Number	Quantity	Unique Serial #	Reference Date: <u>11/13/20</u>
S017036	1		

**(TH) Transaction History**

Manufacturer's Name: **MERCK SHARP & DOHME**  
 Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>11/06/20</b> <b>PO#01210524</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>11/09/20</b> <b>RC#015151</b>
<b>SOLD TO:</b> Name: <b>SUNRISE PHARMACY</b> Address: <b>1637 THIRD AVENUE #A</b> <b>CHULA VISTA CA 91911</b> Date Purchased & Ref : <b>11/13/20</b> <b>01S34214001</b>	<b>SHIPPED TO:</b> Name: <b>SUNRISE PHARMACY</b> Address: <b>1637 THIRD AVENUE #A</b> <b>CHULA VISTA CA 91911</b> Date Received & Ref : <b>11/13/20</b> <b>01S34214001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018550**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I39712Document Type: InvoiceReference Date: 12/17/20

Lot Number	Quantity	Unique Serial #
19BG119X	2	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD  
REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Purchased & Ref : **12/17/20 PO#01211157****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR  
CAMBRIDGE MD 21613**Date Received & Ref : **12/17/20 RC#015950****SOLD TO:**Name: **SUNRISE PHARMACY**Address: **1637 THIRD AVENUE #A  
CHULA VISTA CA 91911**Date Purchased & Ref : **12/17/20 01S36146001****SHIPPED TO:**Name: **SUNRISE PHARMACY**Address: **1637 THIRD AVENUE #A  
CHULA VISTA CA 91911**Date Received & Ref : **12/17/20 01S36146001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017348**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01137214

Document Type: Invoice

Reference Date: 11/12/20

Lot Number	Quantity	Unique Serial #
SY7L	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 11/06/20 PO#01210524

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 11/09/20 RC#015151

**SOLD TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Purchased &amp; Ref : 11/12/20 01S34022002

**SHIPPED TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Received &amp; Ref : 11/12/20 01S34022002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000017349**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01137343
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 11/13/20
AJ8W	1		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 11/06/20 PO#01210524	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 11/09/20 RC#015151
<b>SOLD TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Purchased & Ref : 11/13/20 01S34153001	<b>SHIPPED TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Received & Ref : 11/13/20 01S34153001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018278**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01139055

Document Type: Invoice

Reference Date: 12/09/20

Lot Number	Quantity	Unique Serial #
N78R	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 12/07/20 PO#01210948	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 12/09/20 RC#015740
<b>SOLD TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Purchased & Ref : 12/09/20 01S35595002	<b>SHIPPED TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Received & Ref : 12/09/20 01S35595002
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000018484**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I39552

Document Type: Invoice

Reference Date: 12/15/20

Lot Number	Quantity	Unique Serial #
SY7D	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 12/14/20 PO#01211084

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 12/15/20 RC#015906

**SOLD TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Purchased &amp; Ref : 12/15/20 01S35595003

**SHIPPED TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Received &amp; Ref : 12/15/20 01S35595003

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019623**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01141607

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
7N9K	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Purchased & Ref : 01/21/21 01S37305001	<b>SHIPPED TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Received & Ref : 01/21/21 01S37305001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019890**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01142095

Document Type: Invoice

Reference Date: 01/28/21

Lot Number	Quantity	Unique Serial #
K62P	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 01/27/21 PO#01211698

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 01/28/21 RC#016763

**SOLD TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Purchased &amp; Ref : 01/28/21 01S37305002

**SHIPPED TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Received &amp; Ref : 01/28/21 01S37305002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020662**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01143436

Document Type: Invoice

Reference Date: 02/22/21

Lot Number	Quantity	Unique Serial #
2T4G	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 02/22/21 PO#01212034	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 02/22/21 RC#017222
<b>SOLD TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Purchased & Ref : 02/22/21 01S39490001	<b>SHIPPED TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Received & Ref : 02/22/21 01S39490001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000020681**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01143533

Document Type: Invoice

Reference Date: 02/23/21

Lot Number	Quantity	Unique Serial #
SH7B	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 02/22/21 PO#01212034

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 02/23/21 RC#017225

**SOLD TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Purchased &amp; Ref : 02/23/21 01S39490002

**SHIPPED TO:**

Name: TREMONT CHEMIST

Address: 3131 E TREMONT AVE

BRONX NY 10461

Date Received &amp; Ref : 02/23/21 01S39490002

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144867

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
FU5E	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 03/08/21 PO#01212210	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 03/08/21 RC#017537
<b>SOLD TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Purchased & Ref : 03/15/21 01S40719001	<b>SHIPPED TO:</b> Name: TREMONT CHEMIST Address: 3131 E TREMONT AVE BRONX NY 10461 Date Received & Ref : 03/15/21 01S40719001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019607**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01I41628

Document Type: Invoice

Reference Date: 01/21/21

Lot Number	Quantity	Unique Serial #
682H	1	
Y22X	1	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016622
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37137003	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37137003
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019045**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX TAB 30CT, 800; 150 mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (59676-575-;

NDC: 59676-0575-30

Reference Number: 01I41109

Document Type: Invoice

Reference Date: 01/14/21

Lot Number	Quantity	Unique Serial #
20JG269	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/04/21 PO#01211295	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/05/21 RC#016278
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/14/21 01S37411001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/14/21 01S37411001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019623**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)			Reference Number: 01141599
NDC: 49702-0231-13			Document Type: Invoice
Lot Number	Quantity	Unique Serial #	Reference Date: 01/21/21
7N9K	2		

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE  
 Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/21/21 01S37411002	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/21/21 01S37411002
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019621**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

ISENTRESS 400MG TAB 60CT, 400 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE (0006-0227-61)

NDC: 00006-0227-61

Reference Number: 01I41677

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
T013565	2	

**(TH) Transaction History**

Manufacturer's Name: MERCK SHARP &amp; DOHME

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016624
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/22/21 01S37896001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/22/21 01S37896001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41677

Document Type: Invoice

Reference Date: 01/22/21

Lot Number	Quantity	Unique Serial #
20JG278	1	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/22/21 01S37896001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/22/21 01S37896001
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.



SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019716**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41844Document Type: InvoiceReference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
19CG205	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:

<b>SOLD TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: <b>BOULEVARD 9229 LLC</b> Address: <b>9229 QUEENS BLVD</b> <b>REGO PARK NY 11374</b> Date Received & Ref :
<b>SOLD TO:</b> Name: <b>SAFE CHAIN SOLUTIONS, LLC</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Purchased & Ref : <b>01/25/21</b> <b>PO#01211652</b>	<b>SHIPPED TO:</b> Name: <b>SAFE CHAIN SOLUTIONS</b> Address: <b>822 CHESAPEAKE DR</b> <b>CAMBRIDGE MD 21613</b> Date Received & Ref : <b>01/25/21</b> <b>RC#016683</b>
<b>SOLD TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Purchased & Ref : <b>01/26/21</b> <b>01S38070001</b>	<b>SHIPPED TO:</b> Name: <b>MODERN PHARMACY LLC</b> Address: <b>123 ALTON ROAD</b> <b>MIAMI BEACH FL 33139</b> Date Received & Ref : <b>01/26/21</b> <b>01S38070001</b>
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019601**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 800MG TAB 30CT, 800 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (59676-

NDC: 59676-0566-30

Reference Number: 01I41844

Document Type: Invoice

Reference Date: 01/26/21

Lot Number	Quantity	Unique Serial #
20JG278	3	

**(TH) Transaction History**

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 01/21/21 PO#01211610	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 01/21/21 RC#016618
<b>SOLD TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Purchased & Ref : 01/26/21 01S38070001	<b>SHIPPED TO:</b> Name: MODERN PHARMACY LLC Address: 123 ALTON ROAD MIAMI BEACH FL 33139 Date Received & Ref : 01/26/21 01S38070001
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :
<b>SOLD TO:</b> Name: Address: Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address: Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000014694**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-231-13)

NDC: 49702-0231-13

Reference Number: 01130150

Document Type: Invoice

Reference Date: 07/31/20

Lot Number	Quantity	Unique Serial #
EW6D	3	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD REGO PARK NY 11374 Date Received & Ref :
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref : 07/30/20 PO#01209091	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref : 07/31/20 RC#013367
<b>SOLD TO:</b> Name: BAY PHARMACY 19 INC Address: 7306 AUSTIN STREET FOREST HILLS NY 11375 Date Purchased & Ref : 07/31/20 01S27639006	<b>SHIPPED TO:</b> Name: BAY PHARMACY 19 INC Address: 7606 AUSTIN STREET FOREST HILLS NY 11375 Date Received & Ref : 07/31/20 01S27639006
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :
<b>SOLD TO:</b> Name: Address:  Date Purchased & Ref :	<b>SHIPPED TO:</b> Name: Address:  Date Received & Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
(D) did not knowingly ship a suspect or illegitimate product;  
(E) had systems and processes in place to comply with verification requirements under section 582;  
(F) did not knowingly provide false transaction information; and  
(G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000019214**(TI) Transaction Information**Drug Name, Strength, Dosage Form, Container Size:  
**PREZCOBIX TAB 30CT,**

NDC: 59676-0575-30

Reference Number: 01I41045Document Type: InvoiceReference Date: 01/13/21

Lot Number	Quantity	Unique Serial #
19CG205	1	

**(TH) Transaction History**Manufacturer's Name: **JANSSEN PRODUCTS**  
Manufacturer's information:**SOLD TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Purchased &amp; Ref :

**SHIPPED TO:**Name: **BOULEVARD 9229 LLC**Address: **9229 QUEENS BLVD****REGO PARK NY 11374**

Date Received &amp; Ref :

**SOLD TO:**Name: **SAFE CHAIN SOLUTIONS, LLC**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Purchased & Ref : **01/08/21 PO#01211411****SHIPPED TO:**Name: **SAFE CHAIN SOLUTIONS**Address: **822 CHESAPEAKE DR****CAMBRIDGE MD 21613**Date Received & Ref : **01/08/21 RC#016362****SOLD TO:**Name: **HEALTHMAX PHARMACY**Address: **80-07 JAMAICA AVENUE****WOODHAVEN NY 11421**Date Purchased & Ref : **01/13/21 01S37353001****SHIPPED TO:**Name: **HEALTHMAX PHARMACY**Address: **80-07 JAMAICA AVENUE****WOODHAVEN NY 11421**Date Received & Ref : **01/13/21 01S37353001****SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;  
 (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;  
 (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;  
 (D) did not knowingly ship a suspect or illegitimate product;  
 (E) had systems and processes in place to comply with verification requirements under section 582;  
 (F) did not knowingly provide false transaction information; and  
 (G) did not knowingly alter the transaction history.

SAFE CHAIN SOLUTIONS, LLC

**Drug Supply Chain Security Act Document** Doc#00000021304**(TI) Transaction Information**

Drug Name, Strength, Dosage Form, Container Size:

TIVICAY 50MG TAB 30CT, 50 mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE (49702-228-13)

NDC: 49702-0228-13

Reference Number: 01144819

Document Type: Invoice

Reference Date: 03/15/21

Lot Number	Quantity	Unique Serial #
682H	3	
Y22W	5	

**(TH) Transaction History**

Manufacturer's Name: VIIV HEALTHCARE

Manufacturer's information:

**SOLD TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD

REGO PARK NY 11374

Date Received &amp; Ref :

**SOLD TO:**

Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Purchased &amp; Ref : 03/08/21 PO#01212210

**SHIPPED TO:**

Name: SAFE CHAIN SOLUTIONS

Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received &amp; Ref : 03/08/21 RC#017537

**SOLD TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Purchased &amp; Ref : 03/15/21 01S40675001

**SHIPPED TO:**

Name: TOTAL REMEDY &amp; PRESCRIPTION CENTER

Address: 1234 WILSHIRE BLVD #106

LOS ANGELES CA 90017

Date Received &amp; Ref : 03/15/21 01S40675001

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**SOLD TO:**

Name:

Address:

Date Purchased &amp; Ref :

**SHIPPED TO:**

Name:

Address:

Date Received &amp; Ref :

**(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)**

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.